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Jan 30 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **715831** (4)

1. Corporation Name

SERTOMA CLUB OF ORLANDO, INC.



Principal Place of Business P.O. BOX 2483 ORLANDO FL 32802 US	Mailing Address P.O. BOX 2483 ORLANDO FL 32802-2483 US
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3. Date Incorporated or Qualified 01/02/1969	3a. Date of Last Report 03/11/1996
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2. Principal Place of Business	2a. Mailing Address
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21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
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22 City & State	27 City & State
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23 Zip	28 Country	29 Zip	30 Country
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4. FEI Number 59-6213291	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BUNKER, WILLIAM H.
1914 KINGSLAND AVENUE
32808**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	HAUSER, CAMILLE D.	
STREET ADDRESS	8316 DEARMONT AVENUE	
CITY-ST-ZIP	ORLANDO FL	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	REES, CYNTHIA	
STREET ADDRESS	107 MADRID DRIVE	
CITY-ST-ZIP	CASSELBERRY FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	WINNER, BRUCE	
STREET ADDRESS	9313 RAVEN DELL ST.	
CITY-ST-ZIP	ORLANDO FL 32825	

TITLE	T	<input type="checkbox"/> DELETE
NAME	GARRITY, WILLIAM J.	
STREET ADDRESS	6053 LEXINGTON PARK	
CITY-ST-ZIP	ORLANDO FL 32819	

TITLE	S	<input type="checkbox"/> DELETE
NAME	BUNKER, WILLIAM H.	
STREET ADDRESS	1914 KINGSLAND AVENUE	
CITY-ST-ZIP	ORLANDO FL 32808	

TITLE	D	<input type="checkbox"/> DELETE
NAME	WISE, JOHN W.	
STREET ADDRESS	1582 PINEHURST DR.	
CITY-ST-ZIP	CASSELBERRY FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	HAUSER, CAMILLE D.	
1.3 STREET ADDRESS	223 W. LAKE FAITH DR	
1.4 CITY-ST-ZIP	MAITLAND FL 32751	

2.1 TITLE	PElect	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	WAGES, JEANNETTE	
2.3 STREET ADDRESS	1201 N. ORLANDO AV	
2.4 CITY-ST-ZIP	WINTER PARK, FL 32789	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE	D WISE, JOHN W.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	1414 GAY RD	
6.3 STREET ADDRESS	WINTER PARK FL 32789	
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William H. Bunker* WILLIAM H. BUNKER Jan 22 1997 407/295-1521

CR2E037 (9/96)