FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 12:25

DOCUMENT # 732794 (3)

1. Corporation Name
THE ORLANDO JAYCEES, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 2047 P. O. BOX 2047 ORLANDO FL 32802 US	POST OFFICE BOX 2047 P. O. BOX 2047 ORLANDO FL 32802 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/19/1975
3a. Date of Last Report: 07/05/1994
4. FEI Number: 59-0385542 ☐ Applied For ☐ Not Applicable
2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HARRIS, STEVE
5505 HERNANDEZ DRIVE
UNIT 245
ORLANDO FL 32808

10. Name and Address of New Registered Agent

81 Name: GARY CASWELL
82 Street Address (P.O. Box Number is Not Acceptable):
83: 2843 Antioch WAY
84 City: ORLANDO FL 85 Zip Code: 32807

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Gary Caswell (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE: 5/30/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	President — D	☒ Change ☐ Addition
NAME	HARRIS, STEVE	12 NAME	GARY CASWELL	
STREET ADDRESS	5505 HERNANDEZ DRIVE, UNIT 245	13 STREET ADDRESS	2843 Antioch WAY	
CITY-ST-ZIP	ORLANDO FL	14 CITY-ST-ZIP	ORLANDO FL	
TITLE	D	21 TITLE	~~Dorced~~ Treasurer	☒ Change ☐ Addition
NAME	GRAVES, KEVIN	22 NAME	Dorced Kominecki	
STREET ADDRESS	1322 CONSTANTINE STREET	23 STREET ADDRESS	1100 Delaney Ave #B-13	
CITY-ST-ZIP	ORLANDO FL	24 CITY-ST-ZIP	ORLANDO FL 32806	
TITLE	D	31 TITLE	VP — D	☒ Change ☐ Addition
NAME	TOOTLE, DURELL	32 NAME	William Whalow	
STREET ADDRESS	1519 MILLER AVENUE	33 STREET ADDRESS	20 Lucerne Cir #608	
CITY-ST-ZIP	WINTER PARK FL	34 CITY-ST-ZIP	ORLANDO FL 32801	
TITLE	D	41 TITLE	Linda Parker ~~VP~~ — D	☒ Change ☐ Addition
NAME	ROBBINS, DIANA	42 NAME	Linda Parker	
STREET ADDRESS	1101 PALMA DRIVE	43 STREET ADDRESS	127 Meadowlark Dr	
CITY-ST-ZIP	ORLANDO FL	44 CITY-ST-ZIP	Altamonte Springs FL 32701	
TITLE	VD	51 TITLE	Director	☐ Change ☒ Addition
NAME	CASWELL, GARY	52 NAME	Graves, Kevin	
STREET ADDRESS	2843 ANTIOCH WAY	53 STREET ADDRESS	1322 Constantine Dr St	
CITY-ST-ZIP	ORLANDO FL	54 CITY-ST-ZIP	Orlando FL	
TITLE	VD	61 TITLE	Durell	☐ Change ☒ Addition
NAME	HARRIS, STEVE	62 NAME	Darell Tootle	
STREET ADDRESS	P.O. BOX 2047 N/A	63 STREET ADDRESS	1519 Miller Ave	
CITY-ST-ZIP	ORLANDO FL 32802	64 CITY-ST-ZIP	Winter Park FL	

NEW AFTER MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 electronic 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: Stephen F. Harris — 4/18/95 — (407) 292-4390
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0033388