

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 23 PM 3: 32

DOCUMENT # 739763 (1)

1. Corporation Name

SYRIAN LEBANON AMERICAN CLUB OF ORLANDO, INC.

Principal Place of Business

Mailing Address

1208 CANTON AVE.
P O BOX 531051
ORLANDO FL 32853

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P O BOX 531051
ORLANDO FL 32853

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/29/1977	3a. Date of Last Report 03/21/1994
4. FEI Number 59-1889837	Applied For Not Applicable
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	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

DEEB, MIKE
1017 N. MILLS ST.
ORLANDO FL

10. Name and Address of New Registered Agent

81 Name MIKE DEEB	85 Zip Code 32807
82 Street Address (P.O. Box Number is Not Acceptable)	
83 743 MARSCASTLE ST.	
84 City ORLANDO FLORIDA FL	

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 MIKE DEEB

(NOTE: Signature of registered agent and title if applicable)

(NOTE: Signature of officer or director and title if applicable)

2-20-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BUSHRI, DAN 1006 BRADFIELD DR WINTER PARK FL	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	P NED - AIDE 3351 W. ST. BRIDES CIR. ORLANDO FLORIDA 32806
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPO AIDE, NED 3351 W. ST. BRIDES CIR. ORLANDO FL	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP	VPD LYNNE FEKANY 5122 BRENDA DR. ORLANDO FLORIDA 32812
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T JAMMAL, TOUFIC 3520 W. LINA LANE APOPKA FL	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	T THELMA DEEB 743 MARSCASTLE ST ORLANDO FLORIDA 32807
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ROBINSON, NIMRIE 659 TAM COURT WINTER SPRING FL	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	S TRACI AIDE 3351 W. ST. BRIDES CIR ORLANDO FLORIDA 32806
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BESHARA, MICHAEL 4348 LAKE TENNESSEE DR. ORLANDO FL	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	D PHILIP FEKANY 5122 BRENDA DR. ORLANDO FLORIDA 32812
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HAGE, VIOLA 5022 BRENDA DR. ORLANDO FL	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP	D JOE BASILA 4873 EASTWIND AVE ORLANDO FLORIDA 32812

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)(b), Florida Statutes. I further 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: Thelma Deeb - Thelma DEEB

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

2-20-95 (407)-277-2747