

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90059 029 ****61.25

DOCUMENT # 739763	
1. Entity Name SYRIAN LEBANON AMERICAN CLUB OF ORLANDO, INC.	

Principal Place of Business P.O. BOX 531051 ORLANDO FL 32853	Mailing Address P.O. BOX 531051 ORLANDO FL 32853
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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MOORE CR2E037 (11/03)

4. FEI Number 59-1889837	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
SKAFF, GARY 698 CRICKLEWOOD TER. LAKE MARY FL 32746

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	D ☐ Delete
NAME	BASILA, JOHN
STREET ADDRESS	4709 JAMERSON PLACE
CITY-ST-ZIP	ORLANDO FL 32807
TITLE	P ☐ Delete
NAME	HAJJAR, FOUAD DR.
STREET ADDRESS	9827 CAMBERLEY CIRCLE
CITY-ST-ZIP	ORLANDO FL 32836
TITLE	TD ☐ Delete
NAME	DEEB, THELMA
STREET ADDRESS	73 MARCASTLE AVE.
CITY-ST-ZIP	ORLANDO FL 32807
TITLE	SD ☐ Delete
NAME	TERI, AIDE
STREET ADDRESS	5239 ANDREA BLVD.
CITY-ST-ZIP	ORLANDO FL 32807
TITLE	IVP ☐ Delete
NAME	SKAFF, GARY J
STREET ADDRESS	698 CRICKLEWOOD TER.
CITY-ST-ZIP	LAKE MARY FL 32746
TITLE	ZVP ☐ Delete
NAME	JOHARY, CARLOS
STREET ADDRESS	2019 VANDERBILT PT.
CITY-ST-ZIP	LONGWOOD FL 32779

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gary J. Skaff* **GARY J. SKAFF** **4/16/04** **(407)647-7275**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

44033722

739 763

10. Officers and Directors (continued)

Director
Ray Gazil
5094 Hoperita St.
Orlando, FL 32812

Director
Joe Pellittere
3308 Glen Village Ct.
Orlando, FL 32822

Director
Amine Harb
9025 Balmoral Mews Sq.
Windermere, FL 34786

Director
Robert Shakar
125 Red Cedar Dr.
Longwood, FL 32779

Director
~~David Holliday~~
943 Hallowell Circle
Orlando, FL 32828

Director
~~Farid Tawil~~
P.O. Box 162476
Altamonte Springs, FL
32716-2476

Director
Emile Jammal
307 Murphy Rd.
Winter Springs, FL 32708