## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

740045

(0)

Mailing Address

## THE CENTRAL FLORIDA CHAPTER OF THE HOTEL SALES A ND MARKETING ASSOCIATION ITNERNATIONAL, INC

7029 CARDINALWOOD DRIVE ORLANDO FL 32818 US		P.O. BOX 682147 ORLANDO FL 32868-2147 US			
				3. Date Incorporated or Qualified 09/01/1977	3a. Date of Last Report 04/17/1996
•	ace of Business artridge Lane	2a. Mailing Address 26 P. O. Box 91	6014	4. FEI Number 59-2698266	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State Longwo	ood, FL 32779	City & State Longwood, FI	32791	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 32779	Country 25 Seminole	Zip 29 32791 3	Country  Seminole		Yes 🗹 No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
GARNETA SWENSON 7029 CARDINALWOOD DRIVE ORLANDO FL 32818				Linda Allen Address (P.O. Box Number is Not Acceptab	ıle)
			306 Partridge Lane		
V			84 City	Longwood	FL 85 Zip Code 32779
11. Pursuant 1	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes	, the above-named	corporation submits this statement for the p	urpose of changing its registered
office or re agent. I ar	egistered agent, or both, in the State on familiar with, and accept the obligat	if Florida. Such change was autions of, Section 617.0503, Florid	thorized by the corp da Statutes	oration's board of directors. I hereby accep	of the appointment as registered
	Linda Allen, Execut: Skynature, typed or printed name of registered agent		finda G	elen 1/14/97	
12.	Signature, typed or printed name of registered agent OFFICERS AND		Registered Agent signature	required when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12
TITLE	ED OFFICERS AND	DELETE	1.1 TITLE	ED	Change Addition
NAME	GARNETA SWENSON	<del>XX</del>	1.2 NAME	Linda Allen	- And And
STREET ADDRESS	7029 CARDINALWOOD DRIVE		1.3 STREET ADDRESS	306 Partridge Lane	
CITY - ST - ZIP	ORLANDO FL		1.4 City-ST-ZIP	Longwood, FL 32779	
TITLE	p	DELETE	2.1 TITLE	President	Change Addition
NAME	RICK AMMONS		2.2 NAME	Barbara Watson	
STREET ADDRESS	5715 MAJOR BLVD.		2.3 STREET ADDRESS	5445 Forbes Place	
CITY-ST-ZIP	ORLANDO FL		2.4 CITY - ST - ZIP		
TITLE	٧	<b>C</b> DELETE	3.1 TITLE	Orlando, FL 32812 V	Change Addition
NAME	BARBARA WATSON		3.2 NAME	, <b>,</b>	a.a.
STREET ADDRESS	5445 FORBES PLACE		3.3 STREET ADDRESS	Mindi Onderick	
CITY-ST-ZIP	ORLANDO FL		3.4. CITY~ST-ZIP	7050 Kirkman Road	
TITLE	S	DELETE	4.1 TITLE	Orlando, FL 32819	☐ Change ☐ Addition
NAME	KIM BOTBOL		4. 2 NAME		
STREET ADDRESS	P.O. BOX 22818		4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE BUENA VISTA FL		4.4 CITY-ST-ZIP		
TITLE	D	DELETE	5.1 TITLE	D	Change Addition
NAME	LYNN, MUNOZ		5.2 NAME	Kevin Mackinnon	Α.
STREET ADDRESS	7975 CANDA AVE		5.3 STREET ADDRESS	8855 Rent A Car Road	
CITY - ST - ZIP	ORLANDO FL		5.4 CITY-ST-ZIP	Orlando, FL 32827	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	KAREN SIMCOVIAK		6.2 NAME		
STREET ADDRESS	129 CHURCH ST		63 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		6.4 CITY-ST-ZIP		
informatio	in indicated on this annual report or su	ipplemental annual report is tru he receiver or trustee empower	e and accurate and red to execute this r	tated in Section 119.07(3)(i). Florida Statute that my signature shall have the same lega aport as required by Chapter 617, Florida S	al effect as if made under oath; that