

FILE MUST BE FILED AFTER MAY 1 1995

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 740633 (3)

1. Corporation Name

ECONOMICS CLUB OF ORLANDO, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/27/1977** 3a. Date of Last Report **03/11/1994**

4. FEI Number **59-1809264** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$0.75 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 § 199.032, Florida Statutes ☐ Yes ☒ No

Principal Place of Business

Mailing Address

**225 E. ROBINSON ST., #600
PO BOX 2854
ORLANDO FL 32802-2854**

**P. O. BOX 533991
ORLANDO FL 32853-3991
US**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27

City & State

23 Zip

28

Zip

Country

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARBERT, RONALD A
225 E. ROBINSON ST., #600
ORLANDO FL 32801**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D/T**
NAME **STERLING, KIMBERLY**
STREET ADDRESS **617 E. COLONIAL DR**
CITY - ST - ZIP **ORLANDO FL 32803**

1.1 TITLE **D/VP** ☒ Change ☐ Addition
1.2 NAME **RUTLEDGE, HARRY**
1.3 STREET ADDRESS **605 DELANEY**
1.4 CITY - ST - ZIP **ORLANDO, FL 32856**

TITLE **D/S**
NAME **CLEMENT**
STREET ADDRESS **250 PARK AVE SOUTH**
CITY - ST - ZIP **WINTER PARK FL 32789**

2.1 TITLE **D/S** ☒ Change ☐ Addition
2.2 NAME **BUNK, MARY**
2.3 STREET ADDRESS **555 LAKE BORDER DR.**
2.4 CITY - ST - ZIP **APOPKA, FL 32703**

TITLE **D/VP**
NAME **HELMICK, VICKI**
STREET ADDRESS **631 S. ORLANDO AVE STE 200**
CITY - ST - ZIP **WINTER PARK FL**

3.1 TITLE **D/T** ☒ Change ☐ Addition
3.2 NAME **HELMICK, VICKI**
3.3 STREET ADDRESS **1312 STERLING OAKS DR.**
3.4 CITY - ST - ZIP **CASSELBERRY, FL 32707**

TITLE **D**
NAME **CHOTAS, ELIAS N.**
STREET ADDRESS **800 N. MAGNOLIA AVE**
CITY - ST - ZIP **ORLANDO FL**

4.1 TITLE **D/P** ☒ Change ☐ Addition
4.2 NAME **WALLACE, DAN**
4.3 STREET ADDRESS **201 CANTON AVE.**
4.4 CITY - ST - ZIP **WINTER PARK, FL 32789**

TITLE **D/P**
NAME **NELSON, JACK E**
STREET ADDRESS **423 COUNTRY CLUB DR**
CITY - ST - ZIP **WINTER PARK FL**

5.1 TITLE **D** ☒ Change ☐ Addition
5.2 NAME **NELSON, JACK E.**
5.3 STREET ADDRESS **423 COUNTRY CLUB DR.**
5.4 CITY - ST - ZIP **WINTER PARK, FL 32789**

TITLE **D**
NAME **HERRING, LARRY J.**
STREET ADDRESS **1477 W. FAIRBANK AVE., SUITE 200**
CITY - ST - ZIP **WINTER PARK, FL 32789**

6.1 TITLE **D** ☐ Change ☒ Addition
6.2 NAME **HERRING, LARRY J.**
6.3 STREET ADDRESS **1477 W. FAIRBANK AVE., SUITE 200**
6.4 CITY - ST - ZIP **WINTER PARK, FL 32789**

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 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Larry J. Herring
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**LARRY J. HERRING
DIRECTOR**

5-1-95

(407) 647-7777

(Name)

(Telephone Number)