

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT*
1996



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

DOCUMENT # **745119** (8)

1. Corporation Name

THE HAGAR VIKING CLUB OF CENTRAL FLORIDA, INCORPORATED

Principal Place of Business

**3309 MONTEEN DRIVE
ORLANDO, FL 32806-3674**

Mailing Address

**3309 MONTEEN DRIVE
ORLANDO, FL 32806-3674**



700001873737

-06/24/96--01055--023

*****\$61.25**

3. Date Incorporated or Qualified

12/04/1978

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 1366 Augusta

26 1366 Augusta

22 National Blvd

27 National Blvd

23 Winter Springs

28 Winter Springs, FL

24 FL 32822

29 32822

25 Seminole

30 Seminole

4. FEI Number

59-1877109

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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**GUSTAFSSON, NILS
3309 MONTEEN DR.
ORLANDO 32806**

10. Name and Address of New Registered Agent

81 Name

Al Frink

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

1366 Augusta National Blvd

83 City

Winter Springs

84 State

FL

85 Zip Code

32822

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Margareta Uhler

5-16-96

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
KAALSTAD, OSCAR W.
700 WILLOW RUN LN
WINTER SPRINGS FL**

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
GAARLANDT, ROBERT
2698 DANIELLE DR
OVIEDO FL**

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
SCHULZ, ANNAGRETA
520 BEECHWOOD AVENUE
ALTAMONTE SPRINGS FL**

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
FRINK, ALBERT
1366 AUGUSTA NATIONAL BLVD
WINTER SPRINGS FL**

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
FRENCH, EVY
749 BRIGHTVIEW DRIVE
LAKE MARY FL**

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
**President "D" ☒ Change ☐ Addition
AL FRINK
1366 Augusta National Blvd
Winter Springs, FL 32708**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
**Vice President "D" ☒ Change ☐ Addition
Robert Gaarlandt
2698 Danielle Dr.
Oviedo, FL 32765**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
**Treasurer
Marit Cairns "D" ☒ Change ☐ Addition
11128 Lake Butler Blvd
Windermere, FL 34786**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
**Secretary
Margareta Uhler "D" ☒ Change ☐ Addition
372 Goldstone Ct
Lake Mary, FL 32746**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
**Director at Large ☒ Change ☐ Addition
Oscar Kaalstad "D"
700 Willow Run Lane
Winter Springs, FL 32708**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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

SIGNATURE:

Margareta Uhler **4-24-96** **407 321-6424**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)