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Apr 10 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 747650 (0)
1. Corporation Name
CPR FOR CITIZENS OF EAST CENTRAL FLORIDA, INC.

Principal Place of Business

Mailing Address

7121 NATHAN CT
WINTER PARK FL 32792

PO BOX 4955
WINTER PARK FL 32793-4955



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

3. Date Incorporated or Qualified

06/14/1979

4. FEI Number

59-1917913

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALKER, JEF
7121 NATHAN COURT
WINTER PARK FL 32792

81 Name RICHARD MCGARITY
82 Street Address (P.O. Box Number is Not Acceptable)
2424 FIFESHIRE DR.
83
84 City WINTER PARK FL 85 Zip Code 32792

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

Richard A. McGarity

3/31/98

Signature, typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	SD	1.1 TITLE	PDT
NAME	HAROLD, NANCY	1.2 NAME	MCGARITY, Rick
STREET ADDRESS	3051 GOLDSBORO PL	1.3 STREET ADDRESS	2424 FIFESHIRE DR.
CITY-ST-ZIP	DUNEDO FL	1.4 CITY-ST-ZIP	WINTER PARK, FL 32792
TITLE	RD	2.1 TITLE	VPD
NAME	BROWN, STEVE	2.2 NAME	MEADORS, TODD
STREET ADDRESS	4728 OLD WINTER GARDEN PL	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	SD
NAME	BRACEWELL, CHARLES	3.2 NAME	BRACEWELL, CHARLES
STREET ADDRESS	2380 WACCASSA STREET	3.3 STREET ADDRESS	2380 WACCASSA STREET
CITY-ST-ZIP	GENEVA FL	3.4 CITY-ST-ZIP	GENEVA, FL
TITLE	VPD	4.1 TITLE	D
NAME	CRAMER, STEVE	4.2 NAME	CRAMER, STEVE
STREET ADDRESS	256 KETTLE CT	4.3 STREET ADDRESS	256 KETTLE CT.
CITY-ST-ZIP	CASSELBERRY FL 32707	4.4 CITY-ST-ZIP	CASSELBERRY FL 32707
TITLE		5.1 TITLE	D
NAME		5.2 NAME	WALKER, JEF
STREET ADDRESS		5.3 STREET ADDRESS	7121 NATHAN CT.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	WINTER PARK, FL 32792
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

1.1 TITLE	PDT	Change	Addition
1.2 NAME	MCGARITY, Rick		
1.3 STREET ADDRESS	2424 FIFESHIRE DR.		
1.4 CITY-ST-ZIP	WINTER PARK, FL 32792		
2.1 TITLE	VPD	Change	Addition
2.2 NAME	MEADORS, TODD		
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE	SD	Change	Addition
3.2 NAME	BRACEWELL, CHARLES		
3.3 STREET ADDRESS	2380 WACCASSA STREET		
3.4 CITY-ST-ZIP	GENEVA, FL		
4.1 TITLE	D	Change	Addition
4.2 NAME	CRAMER, STEVE		
4.3 STREET ADDRESS	256 KETTLE CT.		
4.4 CITY-ST-ZIP	CASSELBERRY FL 32707		
5.1 TITLE	D	Change	Addition
5.2 NAME	WALKER, JEF		
5.3 STREET ADDRESS	7121 NATHAN CT.		
5.4 CITY-ST-ZIP	WINTER PARK, FL 32792		
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. 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 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:

Richard A. McGarity

CR2E037 (10/97)