


FILE NOW: FILING FEE IS \$61.25

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Apr 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 754033 (9)
1. Corporation Name
CENTRAL FLORIDA HOTEL AND MOTEL ASSOCIATION, INC



Principal Place of Business	Mailing Address
7208 SAND LAKE RD STE. 205 ORLANDO FL 32819 US	7208 SAND LAKE RD STE. 205 ORLANDO FL 32819 US

3. Date Incorporated or Qualified

09/03/1980

4. FEI Number

59-2075117

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

City & State

30

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

TAUBENSEE, CHERYL
7208 SAND LAKE ROAD, #205
ORLANDO FL 32819

81 Name

Richard J. Maladecki - Executive Director

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

7208 Sand Lake Road, Suite 205

83

84 City

Orlando

FL

85 Zip Code

32819

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

R J MALADECKI

(NOTE: Registered Agent signature required when reinstating)

DATE

3/30/98

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	BEMENT, DENNIS	
STREET ADDRESS	7208 SAND LAKE ROAD, #205	
CITY-ST-ZIP	ORLANDO FL	

TITLE	SD	<input type="checkbox"/> DELETE
NAME	BETTCHEER, MEL	
STREET ADDRESS	7208 SAND LAKE ROAD, #205	
CITY-ST-ZIP	ORLANDO FL	

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	MEARS, DEB	
STREET ADDRESS	7208 SAND LAKE ROAD, #205	
CITY-ST-ZIP	ORLANDO FL	

TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	VILLAVEVERDE, ALAN	
STREET ADDRESS	7208 SAND LAKE RD #205	
CITY-ST-ZIP	ORLANDO FL 32819	

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MCCREARY, BILL	
STREET ADDRESS	7208 SAND LAKE RD #205	
CITY-ST-ZIP	ORLANDO FL	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	BEMENT, DENNIS	
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		

2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BETTCHEER, MEL	
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Robbins, Louis	
3.3 STREET ADDRESS	7208 Sand Lake Rd, Suite 205	
3.4 CITY-ST-ZIP	Orlando, FL 32819	

4.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Engfer, Pat	
4.3 STREET ADDRESS	7208 Sand Lake Rd, Suite 205	
4.4 CITY-ST-ZIP	Orlando, FL 32819	

5.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	MCCREARY, BILL	
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

R J MALADECKI

3/30/98

407-352-0114

CR2E037 (10/97)