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FILED

Jan 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 828680

(9)

1. Corporation Name

VOA ASSOCIATES INCORPORATED

Principal Place of Business

200 S. ORANGE AVE
SUITE 1300
ORLANDO FL 32801
US

Mailing Address

200 S. ORANGE AVE
SUITE 1300
ORLANDO FL 32801-3436
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

VAN STEENLANDT, MARC A
200 SOUTH ORANGE AVENUE, SUITE 1300
ORLANDO FL 32801

3. Date Incorporated or Qualified

09/20/1972

3a. Date of Last Report

02/20/1996

4. FEI Number

36-2674078

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

10. Name and Address of New Registered Agent

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

TITLE CD ☐ DELETE

NAME VICKREY, WILMONT
STREET ADDRESS 224 S. MICHIGAN AVE., #1400
CITY-ST-ZIP CHICAGO IL 60604

TITLE PTD ☐ DELETE

NAME TOULIS, M.A.
STREET ADDRESS 224 S. MICHIGAN AVE., #1400
CITY-ST-ZIP CHICAGO IL 60604

TITLE VM ☐ DELETE

NAME VAN STEENLANDT, MARC A
STREET ADDRESS 200 S. ORANGE AVE., #1300
CITY-ST-ZIP ORLANDO FL 32801

TITLE V ☐ DELETE

NAME FERY, THEODORE
STREET ADDRESS 200 S. ORANGE AVE., #1300
CITY-ST-ZIP ORLANDO FL 32801

TITLE S ☐ DELETE

NAME BRADFORD, WILLIAM S.
STREET ADDRESS 224 S. MICHIGAN AVE., #1400
CITY-ST-ZIP CHICAGO IL 60604

TITLE VD ☐ DELETE

NAME PECK, CALVIN H
STREET ADDRESS 200 S. ORANGE AVE., #1300
CITY-ST-ZIP ORLANDO FL 32801

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marc A. Van Steenlandt
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 7 1997

Date

407-425-2500

Daytime Phone #

CR2E034 (9/96)