

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90194 040 ****61.25

DOCUMENT # C10415

1. Entity Name
**ORLANDO COUNCIL NO. 5, ROYAL AND SELECT
MASTERS**



Principal Place of Business
**3813 WYLDEWOOD LANE
ORLANDO, FL 32806-7422**

Mailing Address
**3813 WYLDEWOOD LANE
ORLANDO, FL 32806-7422**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. PEI Number

59-1809187

Applied for

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FLETCHER, JOHN B JR
3813 WYLDEWOOD LANE
ORLANDO, FL 32806-7422**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
D
DICKENSON, JAMES D ☒ Delete
STREET ADDRESS
101 SILVER CLUSTER CT.
CITY-ST-ZIP
LONGWOOD, FL 327504029

TITLE
NAME
D
OVERBEE, JR., RICHARD A. ☐ Change ☒ Addition
STREET ADDRESS
1675 KIMMIE KAY ST.
CITY-ST-ZIP
GENEVA, FL 32732-9724

TITLE
NAME
D
STIPICH, TONY ☒ Delete
STREET ADDRESS
1424 SARA L ST
CITY-ST-ZIP
KISSIMMEE, FL 347442771

TITLE
NAME
D
LOVETT, W. CAMERON ☐ Change ☒ Addition
STREET ADDRESS
7827 BARBERRY DR.
CITY-ST-ZIP
ORLANDO, FL 32835-5323

TITLE
NAME
C
CAYN, REX C ☐ Delete
STREET ADDRESS
3812 VIRGINIA DR
CITY-ST-ZIP
ORLANDO, FL 328033051

TITLE
NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
T
WARREN, CHARLES W ☐ Delete
STREET ADDRESS
664 WREN DR
CITY-ST-ZIP
CASSELBERRY, FL 327074817

TITLE
NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
D
FLETCHER, JOHN B ☐ Delete
STREET ADDRESS
3813 WYLDEWOOD LN
CITY-ST-ZIP
ORLANDO, FL 328067422

TITLE
NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE
NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John B. Fletcher, Jr. **JOHN B. FLETCHER, JR.** **1/11/07** **407-851-8456**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #