

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 27 PM 3:13

DOCUMENT # **N00266** (9)

1. Corporation Name

ORLANDO CHAPTER OF THE AMERICAN INSTITUTE OF ARCHITECTS INC.

Principal Place of Business

200 E ROBINSON ST #260
ORLANDO FL 32801
US

Mailing Address

200 E ROBINSON ST #260
ORLANDO FL 32801
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/08/1983	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2721141	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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**BAILEY, KEITH
222 W MAITLAND BLVD
MAITLAND FL 32751**

10. Name and Address of New Registered Agent

81 Name TED HUNTER
82 Street Address (P.O. Box Number is Not Acceptable)
83 1900 SUMIT TOWER BLVD. #300
84 City ORLANDO
85 Zip Code FL 32810

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

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

(NOTE: Registered Agent signature required when registering)

2/17/95
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	1.1 TITLE	☒ Change ☐ Addition
NAME	THOMAS, KEITH	1.2 NAME	SECRETARY
STREET ADDRESS	1065 RAINIER DR	1.3 STREET ADDRESS	SANFORD COHN
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	1.4 CITY-ST-ZIP	145 LINCOLN AVE. WINTER PARK, FL 32789
TITLE	P	2.1 TITLE	☒ Change ☐ Addition
NAME	BAILEY, KEITH	2.2 NAME	PRESIDENT
STREET ADDRESS	222 W MAITLAND BLVD	2.3 STREET ADDRESS	TED HUNTER
CITY-ST-ZIP	MAITLAND FL	2.4 CITY-ST-ZIP	1900 SUMIT TOWER BLVD. #300 ORLANDO, FL 32810
TITLE	VP	3.1 TITLE	☒ Change ☐ Addition
NAME	HUNTER, TED	3.2 NAME	V. PRES.
STREET ADDRESS	1900 SUMIT TOWER BLVD	3.3 STREET ADDRESS	MIKE RODRIGUEZ
CITY-ST-ZIP	MAITLAND FL	3.4 CITY-ST-ZIP	1265 S. SEMORAN BLVD. #1245 WINTER PARK, FL 32792
TITLE	D	4.1 TITLE	☒ Change ☐ Addition
NAME	RODRIGUEZ, MICHAEL	4.2 NAME	DIRECTOR
STREET ADDRESS	201 E PINE ST	4.3 STREET ADDRESS	JOHN CUNNINGHAM
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	200 S. ORANGE AVE. #1240 ORLANDO, FL 32801
TITLE	D	5.1 TITLE	☒ Change ☐ Addition
NAME	NEED, CHARLES	5.2 NAME	DIRECTOR
STREET ADDRESS	800 N MAGNOLIA AVE	5.3 STREET ADDRESS	DEBRA LUPTON
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	1717 S. ORANGE AVE. ORL FL 32806
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	TEGELER, DAVID	6.2 NAME	
STREET ADDRESS	4080 WATERVIEW LOOP	6.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	6.4 CITY-ST-ZIP	

OKAY

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:

Keith C. Hunter
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

2/17/95

407-875-

0222