

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N01795 (6)
1. Corporation Name
GREATER ORLANDO SPORTS ORGANIZING COMMITTEE, INC



Principal Place of Business Mailing Address
1 CITRUS BOWL PLACE C/O FOHN FOHL
400 S. RIO GRANDE AVE 2029 WOODLAWN DR
ORLANDO FL 32805-9451 ORLANDO FL 32805-9451
US

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 25 Country 29 Country 30 Country

3. Date Incorporated or Qualified 03/06/1984 3a. Date of Last Report 04/07/1995
4. FEI Number 59-2389928 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

9. Name and Address of Current Registered Agent

CLARK, JEFF B.
105 E ROBINSON ST #300
ORLANDO FL 32801

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 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

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 PD ☐ DELETE
NAME NOLAN, BILL
STREET ADDRESS 2000 ALDEN RD.
CITY-ST-ZIP ORLANDO FL 32803
TITLE SD ☐ DELETE
NAME FULTON, RICHARD
STREET ADDRESS 200 S ORANGE AVE
CITY-ST-ZIP ORLANDO FL
TITLE TD ☐ DELETE
NAME MCCOLLOUGH, PHIL
STREET ADDRESS 111 N ORANGE AVE
CITY-ST-ZIP ORLANDO FL
TITLE VD ☐ DELETE
NAME MCDOWELL, GENE
STREET ADDRESS UCF DEPT OF ATHLETICS
CITY-ST-ZIP ORLANDO FL
TITLE CD ☐ DELETE
NAME CLARK, JEFF
STREET ADDRESS 105 E ROBINSON ST 300
CITY-ST-ZIP ORLANDO FL
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME PD William T. Nolan
1.3 STREET ADDRESS 2121 CAMDEN RD.
1.4 CITY-ST-ZIP ORLANDO, FL 32803
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

William T. Nolan 7/15/96 407/875-1168

CR2E037 (12/95)