

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N03760**

(8)

1. Corporation Name

TODAY'S FLORIDIAN, INC.



Principal Place of Business

Mailing Address

~~1700 NW 6 ST~~
~~WINTER HAVEN FL 33881~~
US

~~1700 NW 6 ST~~
~~WINTER HAVEN FL 33881~~
US

3. Date Incorporated or Qualified

06/19/1984

3a. Date of Last Report

04/10/1995

2. Principal Place of Business

2a. Mailing Address

21 **TODAY'S FLORIDIAN, INC.**

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **2071 Katie Ct.**

27

City & State

City & State

23 **Winter Haven, Florida**

28

Zip

Country

Zip

Country

24 **33884**

25 **USA**

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MATTOX, RAY
170 EAST CENTRAL AVENUE
WINTER HAVEN FL 33880

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
	PD	GNAGE, FRAN	2071 KATIE CT	
		WINTER HAVEN FL		
	VP	WINGATE, NANCY	8 LAKE WINTERSET DR	<input checked="" type="checkbox"/> DELETE
		WINTER HAVEN FL		
	VP	HILL, ALICE	216 PARKSIDE DR S.E.	<input checked="" type="checkbox"/> DELETE
		WINTER HAVEN FL		
	RSD	SGOTT, ISABEL	900 PIEDMONT DR S.E.	<input checked="" type="checkbox"/> DELETE
		WINTER HAVEN FL		
	CS	RUTH SMERZENSKI	23 KENDRA CT S.W.	<input checked="" type="checkbox"/> DELETE
		WINTER HAVEN FL		
	TD	MATLAK, KIM	399 TENNIS LANE	<input checked="" type="checkbox"/> DELETE
		WINTER HAVEN FL		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	V/P	Beulah McKnight	P.O. Box 116	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		Dundee, FL 33838		
	V/P	Kim Matlak	399 Tennis Lane	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		Winter Haven, FL 33881		
	R/S/D	Jutta Copley	136 Lincoln Road S.E.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		Winter Haven, FL 33884		
	C/S	Wilma Young	293 Wolverline Ln.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		Haines City, FL 33844		
	T/D	Julia Dodwell	301 La Serena	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		Winter Haven, FL 33884		

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 19.07(3)(b), 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: **Frances Gnage**

Frances Gnage

April 7, 1996

941-3246675

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)