FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthare Secretary of State

DIVISION OF CORPORATIONS

1996

N05333 DOCUMENT #

(2)

THE RITH O RETTERMENT COMMITTEE INC

APPROVED AND

1996 NUR 26 MI 10: 03



THE BITHLU BETTERMENT COMMITTEE INC.									
Principal Place of Business Mailing Address						f tagetier an earn, and man		• • • • • • •	
18555 OLD CHE ORLANDO FL 3	NEY HWY.	18895 LANSING ST. ORLANDO FL 32833							
OUTHINGO LE M	2000					3. Date Incorporated or Qualified 09/07/1984	3a. Date o	f Last Re 19/199	
2. Principal Plac	o of Business	2a. Mailing Address				4. FEI Number			plied For
z, Principal Plac 1	B OLDORNess	26				59-2450370			t Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required				
2		27			45.00				
City & State		City & State				Election Campaign Financing Trust Fund Contribution		· -	may be to Fees
:3		28 Zip	T Cou	intry		This corporation has liability for int	angible tax u	nder s. 1	99.032,
<i>Z</i> ip □	Country	29	30			Florida Statutes	Yes Ly≵No		
4	9. Name and Address of Current		.11	[10. Name and Address of New Re	gistered Age	nt	
	5. 144.15			B1	Name				
LLOYD, GEORGE				82	Street Addre	ddress (P.O. Box Number is Not Acceptable)			
18895 LA									
) FL 32833			83					
0,10 410				84	City		EI	35 Zip	Code
					<u> </u>	ation submits this statement for the purp d of directors. I hereby accept the appoi	FL	ing its re	aistered office
SIGNATURE /	Striature typed or groups name of registered agent of OFFICERS AND		TE Registere		signaturu required	when renstating! ADDITIONS/CHANGES TO OFFICE			S IN 12
THILE	SD	DELETE	1.1 7	TITLE			Ц	Change	L Addition
NAME	PATTERSON, SANDRA A.			NAME					
STREET ADDRESS	18028 HOLLISTER RD.		ı.		ADDRESS				
CITY - ST - ZIP	ORLANDO FL 32820-2113	DELETE		CITY-ST TILLE	- ZIP			Change	☐ Addition
TITLE	D CARLES			NAME					
NAME	SHAW' CARMEN 18515 E. COLONIAL DR.				ADDRESS				
STREET ADDRESS	OPLANDO FL 32820			CITY-S		<u> </u>			
CITY-ST-ZIP	PD	DELETE		TITLE				Change	Addition
TITLE NAME	LLOYD, GEORGE G		32	NAME					
STREET ADDRESS	18895 LANSTING ST.		3.3	STREET	ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32833			. CITY - S	ST - ZIP			Change	Addition
TITLE	TD	DELETE		TITLE			L	Ollango	
NAME	BELL, LARRY			2 NAME					
STREET ADDRESS	18600 COMMONWEALTH ST.	•	1		ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32820	DELETE		CITY-S	1-ZIP		Ξ	Change	Addition
TITLE	D NOODE BOREDT	Doccere		2 NAME					
NAME	MOORE, ROBERT 18893 LANSING ST.				ADDRESS	~ nr = -	<i>2</i> :.1		
STREET ADDRESS	ORLANDO FL 32820			4 C:TY-S		SCC 326.	16		
CITY-ST-ZIP TITLE	UNDANIDO I E SECEO	DELETE		1 TITLE] Change	Addition
NAME			63	2 NAME					
STREET ADDRESS			6	3 STAFET	T ADDRESS	# Deposited by Bank			
CITY-ST-ZIP			6	4 CITY - 9	ST-ZIP	for the exemption stated in Section 119	OZIGNIA Flor	da Statu	tes I further
9111 91-611		with this files is voluntarily for	mished ar	nd doe	es not qualify.	for the exemption stated in Section 119	.07 (S)(K), FIOI	ua Jialu	Control

14. Ido 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 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 certify 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 attack ment with a paddress.

SIGNATURE:

THE OR PHINTED NAME OF STENING DIFFICER OF WHECTOR

GEORGE 9. LLOYD (407) 568-5856

1/19/91