FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

	1000					
DOCUMENT # N10043 (0)						
SEMIN	OLE ATHLETIC CONFEREN	ICE INC				
OLIVIII	OLE ATTILLING COM LINE	ICE, INC.			E BANKINI ANI MAJA NAJIR AATII AKA	NA 1665 BIBLI BIBLE BEBLI BIBLI RIBLI BIBLE 1881
Principal Place	e of Business	Mailing Address				DO IIII DIBIC DIDII DIDII BEDIC DIDII BIDII [DDC
2701 RIDGEWOOD AVE.		2701 RIDGEWOOD AVE.				
SANFORD FL 32773		SANFORD FL 32773				
US		US			Date Incorporated or Qualified	3a. Date of Last Report
					07/02/1985	05/01/1995
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
21		26		NOT APPLICABLE	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		3. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Z ip	Country	28			Trust Fund Contribution	Added to Fees
24	25	Zip 29	Counti	У	8. This corporation has liability for	r intangible tax under s. 199,032, Yes No
	9. Name and Address of Curre		30		Florida Statutes 10. Name and Address of New I	
			8	1 Name		
WHIGHA	M, FRANK C.		8:	3 Oleman	Address (P.O. Box Number is Not Accepta	hla\
200 WEST FIRST STREET			8	2 31.661	Assuress (F.O. Box Number is Not Accepta	DIE)
SUN BANK BLDG., SUITE 22			8:	3		
SANFOR	D FL 32771		8	4 City		85 Zip Code
				" "		FL ' ' ' ' ' '
11. Pursuant t	to the provisions of Sections 617.050. red agent, or both, in the State of Flor	2 and 617.1508, Florida Statute	es, the above	-named co	orporation submits this statement for the pu board of directors. I hereby accept the app	rpose of changing its registered office
familiar wi	th, and accept the obligations of, Sec	tion 617.0503, Florida Statutes	.ea by the con	porations	s board of directors. Thereby accept the app	ontment as registered agent. Lam
SIGNATURE .						
12.	Signature, typed or printed name of registered agen OFFICERS AN	Carolitate in applicable (NO ID DIRECTORS	13.	ent signature r	required when reinstaling) ADDITIONS CHANGES TO OF	DATE FIGERS AND DIRECTORS IN 12
TULE	PD DELETE		1.1 TITLE		ACCUMENT CANADA OF TO OFF	Change Addition
NAME	BOOTHE, DARVIN		1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS			;
CITY - ST - ZIP	ALTAMONTE SPRINGS FL		14 CITY- ST-7/P			
TITLE	PD DELETE		2 1 THTLE	21 TITLE Change		☐ Change ☐ Addition
NAME	EPPS, WAYNE		2.2 NAME			
STREET ADDRESS	601 KING STREET		2 3 STREE	T ADDRESS		
CiTY-ST-ZIP	OVIEDO FL		2 4 CITY	-ST-ZIP		
TITLE	-		3 1 TITLE			Change Addition
NAME STREET ADDRESS	SMITH, DON 4200 DIKE ROAD		3 2 NAME			
CITY-ST-ZIP	WINTER PARK FL			T ADDRESS		
TITLE	PD DELETE		3.4 CITY 4.1 TITLE			☐ Change ☐ Addition
NAME	GAINES, RAYMOND		4 2 NAMI			
STREET ADDRESS	655 LONGWOOD LAKE MAR	Y R		T ADDRESS		
CITY - ST - ZIP	LAKE MARY FL	•	4.4 CITY			
TITLE	Page 2 and 2		5 1 TITLE		3000017!	Ghange Addition
NAME	SCHAPKER, GRETCHEN		5.2 NAME		-03/26/36010	
STREET ADDRESS			5.3 STREE	T ADDRESS	***81.25	yara mana
CITY-ST-ZIP	SANFORD FL		5.4 CITY-		See the state of	
TITLE	PD	DELETE	6 1 TITLE			☐ Change Addition
NAME	GORMAN, PETER		6 2 NAME			De la
STREET ADDRESS	1141 S. COUNTY RD. 427			T ADDRESS	1	2555
CITY - ST - ZIP	LONGWOOD FL		64 CITY -	ST - ZIP		'5 *

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 attractment with an address.

SIGNATURE: 1

WHAT IN DUIS
INATERE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 18, 1996 323-2110 By 200