

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 # N15109 (4)

1. Corporation Name

DOWNTOWN ATHLETIC CLUB OF ORLANDO FOUNDATION, INC.



Principal Place of Business

1850 LEE RD
STE 301
WINTER PARK FL 32789
US

Mailing Address

PO BOX 4062
ORLANDO FL 32802
US

3. Date Incorporated or Qualified
05/27/1986

3a. Date of Last Report
02/20/1995

2. Principal Place of Business

2a. Mailing Address

21 **222 S Westmonte Drive**

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Suite 101**

27

City & State

City & State

23 **Altamonte Springs, FL**

28

Zip

Country

Zip

Country

24 **32714**

25 **USA**

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MALONE, WILLIAM C., IV
827 MENENDEZ COURT
ORLANDO FL 32801**

81 Name

Hupp, Lynn

82 Street Address (P.O. Box Number is Not Acceptable)

222 S. Westmonte Drive

83

Suite 101

84 City

Altamonte Springs

FL

85

**Zip Code
32714**

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

Lynn Hupp - Lynn Hupp

4-25-96

Signature valid or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when installing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	JONES, CHERYL	
STREET ADDRESS	200 S ORANGE AVE #1800	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BOONE, DONALD	
STREET ADDRESS	11 S BUMBY AVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MALONE, WILLIAM C. IV	
STREET ADDRESS	827 MENENDEZ COURT	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CAPONI, RON	
STREET ADDRESS	2933 BRIDGEHAMPTON LN	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DETZEL, JIM	
STREET ADDRESS	382 FOREST PARK CIR	
CITY-ST-ZIP	LONGWOOD FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	Burns, Tanya	
13 STREET ADDRESS	2519 E South St.	
14 CITY-ST-ZIP	Orlando, FL 32803	
21 TITLE	C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Hillman, Scott	
23 STREET ADDRESS	205 W Fairbanks Avenue	
24 CITY-ST-ZIP	Winter Park, FL 32789	
31 TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Hupp, Lynn	
33 STREET ADDRESS	222 S Westmonte Drive, Ste 101	
34 CITY-ST-ZIP	Altamonte Springs, FL 32714	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME	Galloway, Mike	
63 STREET ADDRESS	3319 Maguire Blvd., #130	
64 CITY-ST-ZIP	Orlando, FL 32803	

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:

Lynn Hupp - Lynn Hupp

Date

Daytime Phone #

4-25-96 401-774-7880

CR2E037 (12/95)