FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 01 1997 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT #
1. Corporation Name

N16074

(9)

CENTR	ral florida aids Unifiei	D RESOURCES, INC.				
Principal Place of Business Mailing Address					1 103/11/01 #81 \1007 #10/10 #01/11 \$01/11	6191 61911 61911 61911 61911 61911 61911 1981
741 W COLONIAL DR P O BOX 3725 ORLANDO FL 32804 ORLANDO FL 3280 US US		ORLANDO FL 32802-372	25		,	
00					3. Date Incorporated or Qualified 07/28/1986	3a. Date of Last Report 03/05/1996
21	lace of Business	2a. Mailing Address 26			4. FEI Number 59-2703003	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for	
24	25	29	30			Yes 🔀 No
	9. Name and Address of Curre	nt Registered Agent		04 11	10. Name and Address of New Ro	egistered Agent
				81 Name		
TUCCI, DEBRA J 741 W COLONIAL DR				62 Street	Address (P.O. Box Number is Not Accepta	ble)
ORLAND	O FL 32804			83		
				84 City		85 Zip Code
						i *1_
11. Pursuant office or r	to the provisions of Sections 617.05 registered agent, or both, in the State on familiar with, and accept the oblin	02 and 617.1508, Florida Ste e of Florida. Such change wa pations of Section 617.0503	itutes, the at as authorized Florida Stat	oove-named t by the cor	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing its registered of the appointment as registered
SIGNATURE	in ramina with and accept the oxil	ganons on, 5000001 011.0000,	rionoa otat	utoa.		
SIGNATURE .	Signature, typed or printed name of registered ag	gent and title if applicable. (I	NOTE: Registere	Agent signature	e required when reinstating)	DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	
TOLE	PD	☐ DELETE	1.1 TJ	TLE		Change Addition
NAME	LOCKLER, JAMES L		12 N/	WE		
STREET ADDRESS	411 REDCOAT LANE		1.3 \$1	REET ADORESS		
City-St-7iP	ORLANDO FL 32825			TY-ST-ZIP		
TITLE	VD MOULES J M	is felled Delete	2.110		Vo Bisland	Change
NAME		show. Told	2.2 N		Kirkham Richard Zis Lighthouse Co Altamonte Springs	ct
STREET ADDRESS	715 LIGHTHOUSE COURT	~~ ~	2.3 \$1	REET ADDRESS	TIS LIGHT NOUSE CO	C/ 2 2 7 (4 - 2) 7 C
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 3			ITY-ST-ZIP	Altamonte springs	PL 32714-7275
TITLE	SD ENDEDIE DOUGLAS E	☐ DELETE	3.1 11			Change Addition
NAME PROSEET ADAPTED	ENDERLE, DOUGLAS E. 6828 KNIGHTSWOOD DR.		3.2 N/			
STREET ADDRESS	ORLANDO FL			REET ADDRESS		
CITY - ST - ZIP	TD	VI nei etc		ITY-ST-ZIP	TD .	Change Addition
TITLE	HATOUM, PERRY O	DELETE	4.1 10		William J. Perkins. 1865 Notting ham Dr Winter Park, FL	2.C. May custing TT MONTON
NAME STREET ADDRESS	532 BROADWAY AVENUE		4.2 N	ame Reet address	ISUS Nottinoham Dr	ive
CITY-ST-ZIP	ORLANDOPARK FL 32803			TY-ST-ZIP	Winter Park El	3 2 7 9 2_
TITLE	EXD EXD	DELETE	5.1 TI		WINIE TONE	Change Addition
NAME	TUCCI, DEBRA J	had	5.2 N			FINE
STREET ADDRESS	166 SHERIDAN AVE.			REET ADDRESS		
CITY-S1-ZIP	LONGWOOD FL 32750			TY-ST-ZIP		
TITLE	D	DELETE	6.1 Ti			Change Addition
NAME	PALMER, BOBBY G		6.2 N			<u> </u>
STREET ADDRESS	1300 MORRIS AVENUE			REET ADORESS	1	
CITY - ST - ZIP	ORLANDO FL 32803			TY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

BEQUIRED JAMES L. LOCKIKE 4/24/97
INNO OFFICER OR DIRECTOR