

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 # N16950

(0)

1. Corporation Name

ORLANDO INTERLINE CLUB, INC.

Principal Place of Business

Mailing Address

**C/O ULMER, PAUL
155 TOWNE PLACE WEST
TITUSVILLE FL 32796
US**

**C/O ULMER, PAUL
155 TOWNE PLACE WEST
TITUSVILLE FL 32796
US**



3. Date Incorporated or Qualified
09/23/1986

3a. Date of Last Report
02/13/1995

4. FEI Number

NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ULMER, PAUL
155 TOWNE PLACE
TITUSVILLE FL 32796**

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 or officer if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **ROWTON, JERRY**
STREET ADDRESS **18 N. DIXIE AVE.**
CITY-ST-ZIP **TITUSVILLE FL**

TITLE **VD** ☐ DELETE
NAME **SORIE, BETTIE**
STREET ADDRESS **310 CREOLE BRIVE**
CITY-ST-ZIP **MERRITT ISLAND FL**

TITLE **TD** ☐ DELETE
NAME **ULMER, PAUL**
STREET ADDRESS **155 TOWNE PLACE WEST**
CITY-ST-ZIP **TITUSVILLE FL**

TITLE **SD** ☐ DELETE
NAME **BUCK, RENEE**
STREET ADDRESS **424 MONITOR STREET**
CITY-ST-ZIP **MERRITT ISLAND FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

32796

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

32952

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

32796

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

32953

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

VD ☐ Change ☒ Addition
GERRY MORRILL
741 POWDER HORN CIRLE
LAKE MARY FL 32746

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JERRY W. ROWTON, President, 407-267-6747

Date

Daytime Phone #

CR2E037 (12/95)