

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 13 PM 2:35

DOCUMENT # N18406 (1)

1. Corporation Name

THE SOUTH ORLANDO ROWING ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1720 E. GATLIN AVE.
ORLANDO FL 32806
US

P.O. BOX 568782
ORLANDO FL 32806
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/22/1986

3a. Date of Last Report

04/27/1994

4. FEI Number

59-2756841

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

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

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RUSHMER, VERA A
1000 SWEETBRIAR ROAD
ORLANDO FL 32806**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

HOOD, CHARLES, M

STREET ADDRESS

1210 LANCASTER DR

CITY - ST - ZIP

ORLANDO FL

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

**D
Kest, John
1400 Lancaster Dr.
Orlando FL 32806**

☒ Change ☐ Addition

TITLE

TD

NAME

RUSHMER, VERA, A

STREET ADDRESS

1000 SWEETBRIAR RD

CITY - ST - ZIP

ORLANDO FL

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

PD

NAME

RENICK, ROSE MARY

STREET ADDRESS

512 DELANEY PARK DR

CITY - ST - ZIP

ORLANDO FL

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

**P/D
Harv G. Pullum, Jr.
4755 Anderson Rd.
Orlando FL 32812**

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 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 110.07(3)(b), 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:

Vera A. Rushmer

Vera A. Rushmer

4/10/95

407-859-9186

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number