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Mar 26 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # N18406 (1)
1. Corporation Name
THE SOUTH ORLANDO ROWING ASSOCIATION, INC.

Principal Place of Business

1720 E. GATLIN AVE.
ORLANDO FL 32806
US

Mailing Address

P.O. BOX 568782
ORLANDO FL 32856-8782
US3. Date Incorporated or Qualified
12/22/19863a. Date of Last Report
02/26/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number
59-2756841Applied For
☒ Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

RUSHMER, VERA A
1000 SWEETBRIAR ROAD
ORLANDO FL 32806

10. Name and Address of New Registered Agent

81 Name

AMANDA COWAN

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

1501 BELMONT DRIVE

83

84 City

ORLANDO

FL

85 Zip Code
32806

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 AMANDA COWAN, TREASURER

(NOTE: Registered Agent signature required when reinstating)

3/7/97

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETENAME KEST, JOHN
STREET ADDRESS 1400 LANCASTER DR.
CITY-ST-ZIP ORLANDO FLTITLE TD ☐ DELETENAME RUSHMER, VERA, A
STREET ADDRESS 1000 SWEETBRIAR RD
CITY-ST-ZIP ORLANDO FLTITLE PD ☐ DELETENAME PULLUM, HARV G.
STREET ADDRESS 4755 ANDERSON RD.
CITY-ST-ZIP ORLANDO FLTITLE D ☒ DELETENAME MANNIX, MICHAEL
STREET ADDRESS 1710 HOUR GLASS CIR
CITY-ST-ZIP ORLANDO FLTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition1.2 NAME DP
1.3 STREET ADDRESS TIM BOWSER
1.4 CITY-ST-ZIP 3315 Hargill Drive, Orlado, 328062.1 TITLE TD ☐ Change ☒ Addition2.2 NAME AMANDA COWAN
2.3 STREET ADDRESS 1501 BELMONT DRIVE, ORLANDO 32806
2.4 CITY-ST-ZIP3.1 TITLE D ☒ Change ☐ Addition3.2 NAME HARV PULLUM
3.3 STREET ADDRESS 1018 SWEETBRIAR RD., ORLANDO, 32806
3.4 CITY-ST-ZIP4.1 TITLE D ☒ Change ☐ Addition4.2 NAME VERA RUSHMER
4.3 STREET ADDRESS 1000 SWEET BRIAR RD. ORLANDO, 32806
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Amanda Cowan, Treasurer 407-896-8995 3/7/97

CR2E037 (9/96)