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FILED

Feb 20 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N28452 (3)

1. Corporation Name

ORLANDO FOOD BROKERS ASSOCIATION, INC.

Principal Place of Business

3020 MERCY DR.  
ORLANDO FL 32808

Mailing Address

3020 MERCY DR.  
ORLANDO FL 32808-31393. Date Incorporated or Qualified  
09/21/19883a. Date of Last Report  
06/25/1996

4. FEI Number

59-2937677

Applied For

Not Applicable

5. 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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ORLANDO FOOD BROKERS ASSOCIATION, INC.  
3020 MERCY DR.  
ORLANDO FL 32808

81 Name

JIM LAFLEUR

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

8651 COMMODITY CIRCLE

83

84 City

ORLANDO

FL

85 Zip Code  
3281911. Pursuant to the provisions of Sections 617.0503 and 617.0508, 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]

(NOTE: Registered Agent signature required when reinstating)

DATE

2/14/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☐ DELETENAME SCHMITT, ROGER  
STREET ADDRESS 730 BONNIE BRAE ST  
CITY-ST-ZIP WINTER PARK FLTITLE PD ☒ DELETENAME BRYAN, DANNY  
STREET ADDRESS 370 S. NORTHLAKE BLVD., STE. 1000  
CITY-ST-ZIP ALTAMONTE SPRINGS FLTITLE VP ☐ DELETENAME LAFLEUR, JIM  
STREET ADDRESS 8651 COMMODITY CIRCLE  
CITY-ST-ZIP ORLANDO FL 32819TITLE TD ☒ DELETENAME STOCKER, JOHN  
STREET ADDRESS 3020 MERCY DR.  
CITY-ST-ZIP ORLANDO FLTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

V/D

SCHMITT, ROGER  
730 BONNIE BRAE STREET  
WINTER PARK, FL 32789

P/D

LA FLEUR, JIM  
8651 COMMODITY CIRCLE  
ORLANDO, FL 32819

S/T/D

BUCK, MARK  
2828 EDGEWATER DRIVE  
ORLANDO, FL 3280414. 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 of this report.

SIGNATURE

[Signature]

Date

2/14/97 (407) 352-7511

Daytime Phone # 0016925

CR2E037 (9/96)