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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N29958 (8)

1. Corporation Name

THE SUN ROOM SENIOR CENTER, INC.

Principal Place of Business

3015 HERRING AVE
SEBRING FL 33870

Mailing Address

3015 HERRING AVE
SEBRING FL 33870



3. Date Incorporated or Qualified

12/29/1988

3a. Date of Last Report

03/15/1995

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SWENSON, J RICHARD
220 THRUSH AVE
SEBRING FL 33872

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 and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE D ☒ DELETE
NAME MCKINNLEY, COOK
STREET ADDRESS 803 E CANFIELD
CITY-ST-ZIP AVON PARK FL

11 TITLE president ☐ Change ☐ Addition
12 NAME J R Swenson
13 STREET ADDRESS 220 Thrush Ave
14 CITY-ST-ZIP Sebring Fla 33870

TITLE D ☐ DELETE
NAME SMITH, DALE
STREET ADDRESS 226 LOON AVE
CITY-ST-ZIP SEBRING FL

21 TITLE VP ☐ Change ☐ Addition
22 NAME Dale
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME ANDERSON, JOANN
STREET ADDRESS 301 SERENADE DR
CITY-ST-ZIP LAKE PLACID FL

31 TITLE Sec. Treasurer ☐ Change ☐ Addition
32 NAME Alan Baumer
33 STREET ADDRESS 2430 Whately Blvd
34 CITY-ST-ZIP Sebring Fla 33870

TITLE PD ☐ DELETE
NAME SWENSON, J. R
STREET ADDRESS 220 THRUSH AVE
CITY-ST-ZIP SEBRING FL

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE STD ☐ DELETE
NAME SECHLER, DORIS L
STREET ADDRESS 315 LAKE JOSEPHINE SHORE
CITY-ST-ZIP SEBRING FL

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE VD ☒ DELETE
NAME O'DELL, DOROTHY G
STREET ADDRESS 2915 HERRING AVE
CITY-ST-ZIP SEBRING FL

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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

* CORP. SEASON DOUGLAS BAILEY - 941 382-8188

1-16-96

941 382-8188

Date

Daytime Phone #

CR2E037 (12/95)