NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N37240

1. Corporation Name

WINTER PARK IMPROVEMENT FOUNDATION, INC.

Principal Place of Business							
150 N. NEW YORK AVE.							
P.O. BOX 280							
WINTED DADY EL 20700							

Mailing Address 150 N. NEW YORK AVE. P.O. BOX 280

WINTER PARK FL 32790

FILED Feb 22, 1999 8:00 am § Secretary of State

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2. Principal Pl	Place of Business 2a. Mailing Address			3. Date Incorporated or Qualifed 03/26/1990				
21		26	-		4. FEI Number	1 1400	lied For	
Suite, Apt. :	· —				59-3035266		Applicable	
22		27			39 3033200	\$8.75 A		
City & State	City & State City & State				5. Certifcate of Status Desired	Fee Red		
23		28			C. St. C. Compaign Financian		<u></u>	
Zip	Country	Zip	Country		6. Election Campaign Financing Trust Fund Contribution	\$5.00 i Added to		
24	4 25 29 30			10. Name and Address of New Registered Agent				
9. Name and Address of Current Registered Agent					Traine and the second			
david nel	SON		82	82 Street Address (P.O. Box Number is Not Acceptable)				
150 N. NE	w york ave.		83					
WINTER PA	ARK FL 32789		83					
			84	City	FI	85 Zip C	ode	
11. Pursuant i	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes	s, the above	-named o	corporation submits this statement for the purpose of	f changing its	registered	
office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	f Florida. Such change was au	inorized by	ine corbo	ration's board of directors. I hereby accept the appointment of the property o	ointment as reg	ustered	
SIGNATURE		NOTE A			equired when reinstating) DATE		<u> </u>	
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	(signature re	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	PSD OFFICERS AND	DELETE	1.1 TITLE			☐ Change	Addition	
			1.2 NAME				-	
NAME	DAVID NEEDON		1.3 STREET	**************************************				
STREET ADDRESS	100 14: 14217 1 01111 / 1121702							
CITY-ST-ZIP	WINTER PARK FL	Z DELETE	1.4 CITY-S	-ZIP	7	Change	Addition	
TITLE	_		2.1 TITLE		William T. Dymond	C cuange		
NAME	THE HARD STRABOO		2.2 NAME		215 N. Eola Drive			
STREET ADDRESS	122 I AIN AVENUE O.			ADDRESS	Orlando, 62 32802			
CITY-ST-ZIP	WINTER PARK FL 2.40			T-ZIP	manao, no seos	Change	Addition	
TITLE	D X DELETÉ 3.1 TO		3.1 TITLE	ļ	1.1 0-1.0:		Addition	
NAME	SACHA, THOMAS 3.2 N			-	John Casco Sprint Buildin	g		
STREET ADDRESS	ADDRESS 201 N. NEW YORK AVENUE 3.3.5 ST			ADORESS	John Casio S. R. 436 Sprint Buildin Altamonte Springs, fl 327	16		
CITY-ST-ZIP	WINTER PARK FL		3.4. CITY-S	T-ZIP			14 1 A 4-191	
TITLE	D .	☐ DELETE	4.1 TITLE		Challen Farm	Change	Addition	
NAME	JONES, FREDERICK W		4. 2 NAME		Chelly Exum		ļ	
STREET ADDRESS	369 NEW YOUR AVE, SUITE 300)	4.3 STREET	ADDRESS	123 Tangelo Ct.			
CITY-ST-ZIP	WINTER PARK FL		4.4 CITY-S	r-ZIP	Maitland, fl 32794			
TITLE	D	☑ DELETE	5.1 TITLE			Change	☐ Addition	
NAME	HERBERT, TED		5.2 NAME					
STREET ADDRESS	1000 HOLT AVE 2722		5.3 STREE	ADDRESS				
CITY-ST-ZIP	WINTER PARK FL		5.4 CITY-S	Γ-ZIP				
TITLE		☐ DELETE	6.1 TITLE	T		Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	ADDRESS				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP				
44 44 4		this fling door not qualify for	46		Lin Section 119 07(3)(i) Florida Statutes further c	actifu that the in	oformation	

I 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 informationated 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, with all other like empowered.

SIGNATURE:X

ELRE REQUIRED David Nelson

407-644-8281