

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **N40395** (8)

1. Corporation Name

**FLORIDA NARCOLEPSY ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

**1499 RIDGE SHORE DR  
TARPON SPRINGS FL 34689  
US**

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TARPON SPRINGS FL 34689  
US**

3. Date Incorporated or Qualified  
**10/08/1990**

3a. Date of Last Report  
**08/23/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number  
**59-3033120**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

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

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

**LEHNER, ARLENE R.  
1499 RIDGE SHORE DR  
TARPON SPRINGS FL 34689**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **ST** ☐ DELETE  
NAME **LEHNER, ARLENE R.**  
STREET ADDRESS **1499 RIDGE SHORE DR**  
CITY-ST-ZIP **TARPON SPRINGS FL**

11 TITLE **VD** ☐ Change ☒ Addition  
12 NAME **CIKOVIC, MARION**  
13 STREET ADDRESS **2631 59th STREET**  
14 CITY-ST-ZIP **SARASOTA FL 34234**

TITLE **D** ☐ DELETE  
NAME **BETTS, MARY**  
STREET ADDRESS **10457 COOPERWOOD DR.**  
CITY-ST-ZIP **NEW PORT RICHEY FL 34654**

21 TITLE **D** ☐ Change ☒ Addition  
22 NAME **SOMMERKAMP, ROBERT F**  
23 STREET ADDRESS **7501 142nd AVE N #377**  
24 CITY-ST-ZIP **LARGO FL 34641**

TITLE **RD** ☐ DELETE  
NAME **FAY, ROBERT**  
STREET ADDRESS **16211 2ND ST. E.**  
CITY-ST-ZIP **REDINGTON BEACH FL 33708**

31 TITLE **PD** ☒ Change ☐ Addition  
32 NAME **FAY ROBERT**  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE **RD** ☐ DELETE  
NAME **GOETTMANN, ROBERT**  
STREET ADDRESS **5104 43RD AVE. W.**  
CITY-ST-ZIP **BRADENTON FL 34209**

41 TITLE **D** ☒ Change ☐ Addition  
42 NAME **GOETTMAN, ROBERT**  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE **VD** ☐ DELETE  
NAME **RHODES, RON**  
STREET ADDRESS **3773 WAKE AVE.**  
CITY-ST-ZIP **SARASOTA FL 34240**

51 TITLE **D** ☒ Change ☐ Addition  
52 NAME **RHODES, RON**  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **UNDERWOOD, GLENN**  
STREET ADDRESS **12240 69TH TERR N**  
CITY-ST-ZIP **SEMINOLE FL 34642**

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:

*Arlene R. Lehner*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**3/29/96** 813-  
**942-9018**

CR2E037 (12/95)