

FILE NOW: FILING FEE IS \$61.25

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Jun 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N43686** (7)
1. Corporation Name
GREATER ORLANDO LEADERSHIP FOUNDATION, INC.



Principal Place of Business 400 E SOUTH ST 101 ORLANDO FL 32801 US	Mailing Address 400 E SOUTH ST 101 ORLANDO FL 32801-2826 US
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3. Date Incorporated or Qualified 06/04/1991	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21 106 E. CHURCH ST Suite, Apt. #, etc. 22	2a. Mailing Address 26 106 E. CHURCH ST Suite, Apt. #, etc. 27
City & State 23 ORLANDO, FL	City & State 28 Orlando, FL
Zip 24 32801	Country 25 USA
Zip 29 32801	Country 30 USA

4. FEI Number 59-3055348	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent VEERMAN, RALPH V. 400 E SOUTH ST 101 ORLANDO FL 32801	
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10. Name and Address of New Registered Agent	
81 Name Larry Kreider	
82 Street Address (P.O. Box Number is Not Acceptable) 106 E. Church St.	
83	
84 City Orlando	85 Zip Code FL 32801

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]* **Larry Kreider, President** **6/16/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE PD	<input type="checkbox"/> DELETE
NAME VEERMAN, RALPH	
STREET ADDRESS 400 E SOUTH STREET SUITE 101	
CITY-ST-ZIP ORLANDO FL	
TITLE PD	<input type="checkbox"/> DELETE
NAME KREIDER, LARRY	
STREET ADDRESS 106 E. CHURCH ST.	
CITY-ST-ZIP ORLANDO FL	
TITLE SD	<input type="checkbox"/> DELETE
NAME DAVIS, DICK	
STREET ADDRESS 1305 KALURNA CT.	
CITY-ST-ZIP ORLANDO FL	
TITLE TD	<input type="checkbox"/> DELETE
NAME GAY, JOHN	
STREET ADDRESS 200 PASADENA PLACE	
CITY-ST-ZIP ORLANDO FL	
TITLE D	<input type="checkbox"/> DELETE
NAME SCOTT, CAHILL	
STREET ADDRESS 131 PARK LAKE ST.	
CITY-ST-ZIP ORLANDO FL	
TITLE D	<input type="checkbox"/> DELETE
NAME FINDELL, SUSIE	
STREET ADDRESS 200 S. ORANGE AVE.	
CITY-ST-ZIP ORLANDO, FL 32801	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS 716 Vassar Street	
1.4 CITY-ST-ZIP Orlando, FL 32804	
2.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS 1805 KALURNA COURT	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME CAHILL, SCOTT	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 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.

CR2E037 (9/96)