SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.) FLORIDA DEPARTMENT OF STATE NONPROFIT CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (1)**DOCUMENT #** ENGELWOOD PARK NEIGHBORHOOD ASSOCIATION, INC. Mailing Address Principal Place of Business 6037 NAVAJO WAY **8037 NAVAJO WAY** ORLANDO FL 32807 ORLANDO FL 32807 3. Date Incorporated or Qualified 07/18/1991 3a. Date of Last Report 08/07/1995 Applied For 4 FFI Number 2a. Mailing Address 6431 Yellowstone St. 2. Principal Place of Business
6431 Yellowstone St. 59-3059773 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State \Box City & State Added to Fees Trust Fund Contribution 32807 Orlando. 32807 28 Orlando, 23 8. This corporation has liability for intangible tax under s. 199.032, Country Country Zip Yes X No Florida Statutes 32807 30 32807 29 10. Name and Address of New Registered Agent 25 9. Name and Address of Current Registered Agent 81 Name Charles N. Cecil Street Address (P.O. Box Number is Not Acceptable) TRUOT, FRANK 82 6431 Yellowstone St. 6037 NAVAJO WAY 83 F٦ 32807 Orlando ORLANDO FL 32807 85 Zip Code 84 City 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.

Charles N. Cecil Pres. 7-3-96 **SIGNATURE** (NOTE: Registered Agent signature (36/6)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS Y Addition 12. VPD X DELETE 1 1 TITLE TITLE 2E037 1.2 NAME REDMON, PAT TROUT, FRANK NAME 6451 LYONS ST **6037 NAVAJO WAY** 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32807 ORLANDO FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Y Change Addition 2.1 TITLE DELETE TITLE WAGNER, VIRGINIA 2 2 NAME WAGNER, VIRGINIA NAME 717 KANKAKEE LANE 717 KANKAKEE LANE 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32807 2 4 CITY - ST-ZIP ORLANDO FL Change Addition CITY - ST - ZIP DELETE 3 1 TITLE TITLE ULRICH, ELIZABETH 32 NAME ULRICH, ELIZABETH NAME 502 ENGEL DRIVE 3.3 STREET ADDRESS **502 ENGEL DRIVE** STREET ADDRESS <u>ORLANDO FL 32807</u> ORLANDO FL 3.4. CITY-ST-ZIP X Addition Change CITY-ST-ZIP X DELETE 4.1 TITLE TITLE 4.2 NAME CAMPBELL, BUTCH HOSTETLER, SAM NAME **5930 CHENANGO LANE** 4.3 STREET ADDRESS 735 KANKAKEE LANE STREET ADDRESS ORLANDO FL 32807 4.4 CITY - ST - ZIP ORLANDO FL Addition CITY-ST-ZIP Change DELETE 51 TITLE TITLE CECIL, CHARLES 5.2 NAME CECIL, CHARLES NAME 6431 YELLOWSTONE ST. 6431 YELLOWSTONE STREET 5.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32807 5.4 CITY - ST - ZIP ORLANDO FL Addition CITY-ST-ZIP Change DELETE 6.1 TITLE TITLE WEATHERHOLD, LOUISE 6.2 NAME MCDAVID, MARILYN NAME 6007 NAVAJO WAY 63 STREET ADDRESS 726 KANKAKEE LANE CITY-ST-ZIP ORLANDO FL

64.CITY-ST-ZIP ORLANDO FL

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 any name is preserved. STREET ADORESS that my name appears in Block 12 CHARLES N. CECIL, PRES 7-3-96
Destine Phone Proper

0004364

SIGNATURE: