


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N46677
1. Corporation Name

MACINTOSH USERS GROUP OF ORLANDO, INC.

Principal Place of Business Mailing Address (Same)
999 Douglas Ave. Suite 3333
Altamonte Springs, FL 32714 - 2063

3. Date Incorporated or Qualified

12/30/1991

4. FEI Number

59-3106416

Applied For

Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SALFI, DOMNICK J.
999 DOUGLAS AVE.
SUITE ~~2000~~ #3333
ALTAMONTE SPRINGS, FL 32714-2063

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number Is Not Acceptable)	
83	
84 City	FL

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	PD XX DELETE	1.1 TITLE	PD XX Change XX Addition
NAME	Dowling, Patrick	1.2 NAME	Ann Bennett
STREET ADDRESS	41 San Jose Circle	1.3 STREET ADDRESS	3712 Finch St.
CITY-ST-ZIP	Winter Park, FL 32792	1.4 CITY-ST-ZIP	Orlando, FL 32805
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Beers, Jim	2.2 NAME	
STREET ADDRESS	507 Bramblewood Court	2.3 STREET ADDRESS	
CITY-ST-ZIP	Longwood, FL	2.4 CITY-ST-ZIP	
TITLE	SD XX DELETE	3.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kishazy, Christine	3.2 NAME	William Shaeffer
STREET ADDRESS	5275 Images Circle, Apt. 108	3.3 STREET ADDRESS	3712 Finch St.
CITY-ST-ZIP	Kissimmee, FL	3.4 CITY-ST-ZIP	Orlando, FL 32803
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	TD XX DELETE	5.1 TITLE	TD XX Change <input type="checkbox"/> Addition
NAME	McCreary, Gary	5.2 NAME	Averill, Jack E.
STREET ADDRESS	1254 Royal Oak Drive	5.3 STREET ADDRESS	5029 Shelley Ct.
CITY-ST-ZIP	Winter Springs, FL 32708	5.4 CITY-ST-ZIP	Orlando, FL 32807
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	700002490081 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/97)