FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 JUL -7 AM 8:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N93000000062 (0)

1. Corporation Name
COMMUNITY ASSOCIATIONS INSTITUTE, MID-FLORIDA CHAPTER, INC.

Principal Place of Business	Mailing Address
C/O JAMES CURRY ESQ 1900 SUMMIT TOWER BLVD #800 ORLANDO FL 32810 US	C/O JAMES CURRY ESQ 1900 SUMMIT TOWER BLVD ORLANDO FL 32810 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/31/1992
3a. Date of Last Report: 04/21/1994
4. FEI Number: 59-2372113 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26 P.O. BOX 366
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 WINTER PARK, FL
24 Zip / 25 Country	29 32790-0366 / 30 Country

9. Name and Address of Current Registered Agent

CURRY, JAMES P ESQ
1900 SUMMIT TOWER BLVD #800
C/O CURRY, TAYLOR & CARLS, PA
ORLANDO FL 32810

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P	☑ Change ☐ Addition
NAME	MCKEE, TOM	1.2 NAME	STRODE, CHUCK	
STREET ADDRESS	3170 CRESTTEO CIR	1.3 STREET ADDRESS	2225 N. HIAWASSEE RD.	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO, FL	
TITLE	DPE	2.1 TITLE	DPE	☑ Change ☐ Addition
NAME	STRODE, CHUCK	2.2 NAME	SHEPHERD, CLIFF	
STREET ADDRESS	2225 N HIAWASSEE RD	2.3 STREET ADDRESS	20N. ORANGE AVE., #1107	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	ORLANDO, FL	
TITLE	DS	3.1 TITLE	DS	☑ Change ☐ Addition
NAME	ROHRS, GERRI	3.2 NAME	MCCLOGAN, TIM	
STREET ADDRESS	6165 CARRIER DR	3.3 STREET ADDRESS	1174 FLORIDA CENTRAL PARKWAY	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	LONGWOOD, FL	
TITLE	T	4.1 TITLE	DT	☑ Change ☐ Addition
NAME	DIAMOND, KATHY C	4.2 NAME	DIAMOND, KATHY	
STREET ADDRESS	2100 LEE RD STE A	4.3 STREET ADDRESS	2100 LEE ROAD, STE. A	
CITY-ST-ZIP	WINTER SPRINGS FL	4.4 CITY-ST-ZIP	WINTER PARK, FL	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 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)(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: Kathryn N. Diamond 6/30/95 (407)645-4775
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0034118