

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90253 007 ****61.25

DOCUMENT # N93000001680

1. Corporation Name

SOUTH ORANGE ATHLETIC ASSOCIATION, INC.

Principal Place of Business

11310 S ORANGE BLOSSOM TRL
STE 295
ORLANDO FL 32837
US

Mailing Address

11310 S ORANGE BLOSSOM TRL
STE 295
ORLANDO FL 32837
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

04/14/1993

4. FEI Number

59-3172411

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

9. Name and Address of Current Registered Agent

WEBER, RANDY
13313 FALCON PT.
ORLANDO FL 32837

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 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

Randy Weber, Randy Weber, Director

DATE

2/3/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **WEBER, RANDY**
STREET ADDRESS **13313 FALCON PT.**
CITY-ST-ZIP **ORLANDO FL 32837**

TITLE ☐ DELETE

NAME **LAWS, PATRICIA**
STREET ADDRESS **2374 WHISPERING MAPLE DR.**
CITY-ST-ZIP **ORLANDO FL 32837**

TITLE ☒ DELETE

NAME **WINTER, JOSEPH**
STREET ADDRESS **2668 SHINOAK DR**
CITY-ST-ZIP **ORLANDO FL**

TITLE ☒ DELETE

NAME **CRISANTE, TIMOTHY**
STREET ADDRESS **3720 MOLONA DR**
CITY-ST-ZIP **ORLANDO FL 32837**

TITLE ☐ DELETE

NAME **DYER, EMELDA**
STREET ADDRESS **11507 KEELEY CT**
CITY-ST-ZIP **ORLANDO FL 32837**

TITLE ☐ DELETE

NAME **JOYCE, NANCY**
STREET ADDRESS **3387 AMACA CIR**
CITY-ST-ZIP **ORLANDO FL 32837**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Newman, John
1781 King Henry Drive
Kissimmee, Florida 34744

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Dey, Aaron
4132 Brookmyra Drive
Orlando, Florida 32837

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

Randy Weber (Randy Weber) **2/3/99** **908-4262**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)