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.) NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS N93000004564 (1) DOCUMENT #
1. Corporation Name CLEAN LAKES COALITION OF CENTRAL FLORIDA, INC. Principal Place of Business Mailing Address 390 NORTH ORANGE AVENUE 390 NORTH ORANGE AVENUE **SUITE 1100** SUITE 1100 ORLANDO FL 32801 ORLANDO FL 32801 Date Incorporated or Qualified 10/04/1993 3a. Date of Last Report 04/13/1995 2. Principal Place of Business 2a. Mailing Address 4 FELNumber Applied For 59-3269721 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation has liability for intangible tay under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **B&C CORPORATE SERVICES OF CENTRAL FL INC.** Street Address (P.O. Box Number is Not Acceptable) 390 NORTH ORANGE AVENUE **SUITE 1100** 83 ORLANDO FL 32801 City 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. Thereby 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) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/6)TITLE DELETE 1.1 TITLE Change Addition \mathcal{D} CARLSON, BILL NAME 12 NAME JIM THOMAS CR2E037 9955 LAKE GEORGIA DRIVE STREET ADDRESS 1.3 STREET ADDRESS 15668 W. COLONIAL DR ORLANDO FL 32817 CITY-ST-ZIP WINTER GARDEN FL 34787 1.4 CITY-ST-2IP TITLE DELETE 21 TITLE Change **L** Addition D CONNOLLY, ANN NAME LOUISE McCOY 22 NAME SLZO PARKUALE DR. 4226 APOPKA VINELAND ROAD STREET ADDRESS 2.3 STREET ADDRESS WINDERMERE FL 34786 CITY-ST-ZIP ORLANDO FL 32839 2 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition DOYLE, LEECIE NAME 3.2 NAME 5012 ST. DENNIS COURT STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL 32817 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition **DUTTON, ART** NAME 4.2 NAME 9953 LAKE GEORGIA DRIVE STREET ADDRESS 4.3 STREET ADDRESS ORLANDO FL 32817 CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition FETZER, DAN NAME 52 NAME 7627 LAKE MARSHA DRIVE STREET ADDRESS **53 STREET ADDRESS** ORLANDO FL 32819 CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition FIELDS, RANDY NAME 6.2 NAME 1237 WINDSONG ROAD STREET ADORESS 6 3 STREET ADDRESS ORLANDO FL 32809 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)(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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

| SIGNATURE | SIGNATURE | SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR | Date | Dayling Phone #