## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500001687 (1)

ORLANDO ACES, INC.

FILED Mar 09 1998 8:00am Secretary of State

Principal Place of Business Malling Address						T TO STATE OF THE TOLE STATE OF THE OUTER OF THE OUTER OF THE STATE OF	l
3822 JANIE CO ORLANDO FL :			3822 JANE COURT ORLANDO FL 32822			3. Date Incorporated or Qualified	
01101100121	,coes	OILHING	7 1 6 02022			04/10/1995 4. FEI Number Applied For	
						4. FEI Number Applied For Not Applied For	
2. Principal P	ace of Business	2a. Maili	2s. Mailing Address			C 75 + 100	Die
21		26	26			5. Certificate of Status Desired 58.75 Additional Fee Regulred	
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be	
22		27				Trust Fund Contribution Added to Fees	
City & Stat	е		City & State			7. Is this nonprofit corporation a homeowners association?	
Zip	Zip   Country		Zip Country			8. This corporation owes or has paid the current year Intangible	
24	25		29 30			Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent	
				81	Name	ve	
PESINGER, BARBARA 3822 JANIE COURT				82	Street	et Address (P.O. Box Number Is Not Acceptable)	
OVIEDO FL 32822				83	·		
	, 5 02025			84	City	■■ 85 Zip Code	_
						<u>FL</u>	
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 a	m familiar with, and acc	cept the obligations of, Sect	ion 617.0503, Flor	ida Statutes	3.		
SIGNATURE	Signature transfer spirited non-	e of registered agent and title if applic	able (NOTE)	Dealstand Acc	ot elements	ure required when reinstating) DATE	_
12,		OFFICERS AND DIRECTORS		13,	is Righalore	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP		DELETE	1.1 TITLE		Change Addit	ion
NAME	PERSINGER, BAR	BARA	1.2 NAME			İ	
STREET ADDRESS	REET ADDRESS 3822 JANIE COURT		<b> </b>		ADORESS	s	
CITY-ST-ZIP	ORLANDO FL 328	22			T-ZIP		
TITLE	DV	DV DELETE 2.		2.1 TITLE		DV Change Addit	ion
NAME	STAHLIN, LAURA			2.2 NAME		Johnward	
STREET ADDRESS			1 2		Address		
CITY-ST-ZIP					T-ZIP	Deltene F4. 32725	
TITLE	DT		☐ DELETE	3.1 TITLE		Change L Additi	ion
NAME	, , , , , , , , , , , , , , , , , , , ,		3.2 NA			· ·	
STREET ADDRESS	3822 JANIE COUP			3.3 STREET	ADDRESS	3	
CITY-ST-ZIP	ORLANDO FL 328	22	T on eve	3.4. CITY - S	T-ZIP		lan
TITLE			DELETE	4.1 TITLE		Change Additi	1011
NAME				4, 2 NAME		}	
STREET ADDRESS				4.3 STREET		;	
CITY-ST-ZIP			DELETE	4.4 CITY - S	I - ZIP	☐ Change ☐ Addit	ian
TITLE				5.1 TITLE		Change C Additi	יועו
NAME Street Address				5.2 NAME	*DODCOC	,	
				5.3 STREET		,	
CITY-ST-ZIP TITLE	<u> </u>		DELETE	5.4 CITY - S 6.1 TITLE	1 - ZIP	☐ Change ☐ Additi	ion
NAME			L. Deceme	6.2 NAME		J Villings - Assett	-211
				6.3 STREET	Annoree	,	
STREET ADDRESS				0.3 STREET	NU UNESS	' [	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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: Barbara Persuran Barbara Persinger 2-28-98 407-382-0/61

CH2E037 (10/97)