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NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

N96000001505 (4)

USS LAKE CHAMPLAIN ASSOCIATION, INC.

Principal Place of Business 108 GRENADA STREET NORTHEAST LAKE PLACID FL 33952		Mailing Address				• • • • • • • • • • • • • • • • • • • •	(5) 6(1) (55
		** - * - * - * - * - * - * - * - * - *	108 Grenada street northeast Lake Placid FL 33852-3540				
					3. Date Incorporated or Qualified 03/15/1996	3a. Date of Last Re	port
2. Principal Pl	lace of Business	2a. Mailing Address	iling Address		4. FEI Number	App	lied For
21		26			<u> 22-307225</u>	4 Not	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 A	
22		[27]				Fee Red	·
City & State	e	City & State			6. Election Campaign Financing	\$5.00 k	
23	Country	28]	Count	w. /	Trust Fund Contribution	Added to	
Zip	Country	Zip	Country 30		8. This corporation has liability for it	ntangible tax under s Yes XNo	199.032,
24	25 9. Name and Address of Curi		30]		10. Name and Address of New Reg		
	• • • • • • • • • • • • • • • • • • • •		8	1 Name			
DECKO	OFOROF F						
RESKO, GEORGE F			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
108 GRENADA STREET NORTHEAST LAKE PLACID FL 33852			18	3			
LANE PL	AUIU PL 33652						
			8	4 City		FL 85 Zip C	ode
11 Pursuant t	to the provisions of Sections 617.0	502 and 617 1508 Florida Statute	es the abo	ve-named cor	rporation submits this statement for the p	urnose of changing its	registered
office or r	egistered agent, or both, in the Sta	ate of Florida. Such change was a	uthorized	by the corpora	ation's board of directors. I hereby accep	t the appointment as r	egistered
agent La	m familiar with, and accept the ob	ligations of, Section 617.0503, Fig	rida Statul	es.			
SIGNATURE .	Signature, typed or printed name of registered	agent and Me if applicable (NOTE	Registered A	igent signature requ	uired when reinstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		S IN 12
TITLE	PD	☐ DELETE	1.1 TITU	:		☐ Change	☐ Addition
NAME	RESKO, GEORGE F		1.2 NAM	E			
STREET ADDRESS	108 GRENADA STREET NO	DRTHEAST	1.3 STR	ET ADDRESS			
CITY-ST-ZIP	LAKE PLACID FL 33852		1.4 CITY	-ST-ZIP			
TITLE	VD	☐ DELETE	2.1 TITU			Change	Addition
NAME	GRINNELL, RICHARD C		2.2 NAV	E			
STREET ADDRESS	108 GRENADA STREET NO	DRTHEAST	2.3 STR	ET ADDRESS			
CITY-ST-ZIP	LAKE PLACID FL 33852		2. 4 CIT	r-ST-ZIP			
TITLE	SD	DELETE	3.1 TITL			☐ Change	Addition
NAME	NAZEK, PHILLIP E SR.		3.2 NAM	iE			
STREET ADDRESS	108 GRENADA STREET NO	DRTHEAST	3.3 STR	EET ADDRESS			
CITY-ST-ZIP	LAKE PLACID FL 33852		3.4. CIT	r-ST-ZIP			
TITLE	TD	DELETE 4.1				☐ Change	Addition
NAME	MCCANN, CHARLES E		4. 2 NAM	AE			
STREET ADDRESS	108 GRENADA STREET NO	ORTHEAST	4.3 STR	EET ADDRESS			
CHTY-ST-ZIP	LAKE PLACID FL 33852		4.4 C(TY	-ST-ZIP			
TITLE		☐ DELETE	5.1 TITL	F		Change	Addition
NAME			52 NAM	IE			
STREET ADDRESS			53 STA	EET ADDRESS	•		
CITY-ST-ZIP			_	-ST-ZIP			· • • • • • • • • • • • • • • • • • • •
TITLE	☐ DELETE		61 TITL	E		☐ Change	Addition
NAME			6.2 NAM	IE			
STREET ADDRESS			6.3 STR	EET ADDRESS			
CITY - ST - ZIP				'-ST-ZIP			,
14. I do herel	by certify that the information support of indicated on this annual report of	olied with this filing does not quality for supplemental angual report is to	iy for the e	xemption state curate and the	ed in Section 119.07(3)(i), Florida Statutes at my signature shall have the same lega	s. I further certify that I Leffect as if made und	he er path: tha
i am an o	flicer or director of the corporation	or the receiver or trustee empow	ered to ex	ecute this repo	ed in Section 119.07(3)(i), Florida Statutes at my signature shall have the same lega ort as required by Chapter 617, Florida S	tatutes; and that my na	ame

SIGNATURE:

I am an officer or director of the appears in Block 12 or Block

FILED

Feb 05 1997 8:00am

Secretary of State