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Sep 23 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000003292 (7)

1. Corporation Name

FLORIDA'S TRAVELING LIONS, INCORPORATED

Principal Place of Business

Mailing Address

722 PALMWAY ST.
KISSIMMEE FL 34744-5229

722 PALMWAY ST.
KISSIMMEE FL 34744-5229



2. Principal Place of Business

2a. Mailing Address

21 2530 S. ORANGE AVE.

26 2530 S. ORANGE AVE.

3. Date Incorporated or Qualified
06/18/1996

3a. Date of Last Report
N/A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

Applied For

Not Applicable

City & State

City & State

23 SANFORD, FL

28 SANFORD, FL

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

24 32773

Country

Country

25 USA

29 32773

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOLFE, LARRY
200-A JOHN KNOX ROAD
TALLAHASSEE FL 32303-6643

81 Name

Grace Pattison

82 Street Address (P.O. Box Number is Not Acceptable)

917 W Palmway St

83

84 City

Kissimmee

FL

85 Zip Code

34744

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

Grace Pattison

Grace Pattison

8/31/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Registered Agent
Wolfe, Larry
200-A John Knox Road
Tallahassee FL 32303-6643

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Austin J. Weimer
23280 Gold Coast Avenue
Port Charlotte, FL 33980

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President
Alfred R. Faron
1060 S. Carpenter Ave.
Orange City, FL 32763-7007

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Sec'y./Treas.
Sharon L. Mason
2530 S. Orange Avenue
Sanford, FL 32773

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETED

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETED

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Change Addition

14. I do 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.

SIGNATURE: [Signature]

CR2E037 (9/96)