SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

N9600003929 (4)

CENTRAL FLORIDA ASSOCIATION OF RETAIL HOBBY STOR

FILED Sep 19 1997 8:00am Secretary of State



Principal Plac	e of Business	Malling Address		1 10E15101 DIS 10110 DISS 00111 00111 001	
900 SOUTH ORLANDO AVENUE 900 SOUTH ORLANDO AVENUE			IUE .		
WINTER PARK FL 32789		WINTER PARK FL 32789		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 07/25/1996	3a. Date of Last Report
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 634	N. Mills Ave	26 634 N. A	Mills Ave	59-3432055	Not Applicable
Suite, Apt.		Suite, Apl. #, etc.	· · · · · · · · · · · · · · · · · · ·		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	LANDO FI	City & State 28 ORLAN	UDO FI	Election Campaign Financing Trust Fund Contribution	\$5.00 May Ee Added to Fees
- 232 N	Country	Zip a n no 7	Country	8. This corporation owes or has paid	
24 タヘガ	05 25	29 52805	30	Personal Property Tax due June 3	
Breeze.	9. Name and Address of Curre	nt Registered Agent	04 No.	10. Name and Address of New Reg	Istered Agent
	455444		81 Name	Stephen D RAUS	ch
MANDHALL, DIEWANI [62] Street Addres				dress (P.O. Box Number is Not Acceptable	•)
900 SOUTH ORLANDO AVENUE				34 N. MILLS AVE	
WINTER	PARK FL 32789		83		
			84 City	7 / 4 41.73	FL 85 Zip Code 3250 5
				KLANDO	
11, Pursuant	to the provisions of Sections 617.050 registered agent, or both, in the State	02 and 617.1508, Florida Statutes o of Florida. Sucbychange was au	s, the above-named cor hthorized by the corpora	rporation submits this statement for the pu ation's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
agent. I a	m familiar with, and accept the oblig			ation's board of directors. I hereby accept	
SIGNATURE .		will	STCTUEW () Registered Agent signature requ	RAUGUA	September 16/37
12.	Signature, types or printed name of registered ag	ent and title Napplicable. (NOTE: ID DIRECTORS	Hegistered Agent signature requ	UITED WHEN PEIRISTALING) ADDITIONS/CHANGES TO OFFICE	DATE /
TITLE	OFFICERS AN	DELETE	117015 1/ 0	Willed DISSIDENT	Change Addition
NAME		- P	4 DAIANAG	Shadad Harkey	
STREET ADDRESS			1.3 STREET ADDRESS	5600 W colonial OY	7 311
CITY-ST-ZIP	1		1.4 CITY-ST-ZIP	ORIMONO EL 320	308
TITLE		☐ DELETE	2.1 TITLE D	ORLHWIDO FI 329 President	☐ Change ☐ Addition
NAME		—	2.2 NAME	President Stephen O RAUGEN 634 N. Mills AVY	
STREET ADDRESS			2.3 STREET ADDRESS	534 N. MillS AVY	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	ORCANDO FI	32803
TITLE		DELETE	3.1 TITLE //	DIVECTOY	32803 ☐ Change ☐ Addition
NAME			3.2 NAME	RON Mammer T	
STREET ADDRESS			3.3 STREET ADDRESS	TOTAL 751 W COlor	ral Dr
CITY-ST-ZIP				ORLANDO FI 32	2804
TITLE		DELETE		rector	Change Addition
NAME			4. 2 NAME	Frank Dowler	
STREET ADDRESS	<u>!</u>		4.3 STREET ADDRESS 2	2814 CORRINE DY	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	DRLANDO FI 32	803
TITLE		DELETE		13 4 4 2 T/2 1/	I Change I I Addition I
NAME			5.2 NAME	Rob Michael	
STREET ADDRESS			5.3 STREET ADDRESS	Rob Michael 430 E 52436 501	7 106
CITY-ST-ZIP			5.4 CITY+ST-ZIP	CASSELBERTY FI	32 <i>70</i> 7
TITLE		DELETE	6.1 TITLE ${\cal D}$	DIVECTOR	Change Addition
NAME			6.2 NAME	Bob Schuster 8255 INTERNATIONAL	
STREET ADDRESS	۲.		6.3 STREET ADDRESS	8255 INTERNATIONAL	DI
CITY-ST-ZIP			6.4 CITY-ST-ZIP	OFLANDO FI 3	2819
44 Leig borok	ay and the that the information a malia	al college de la different al company and a constitue	facility a committee state	od in Conting 110 07/2)(i) Florido Ctatulas	I fourth as a partific the at the

information indicated on this annual report or supplied with finis fling 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.