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Mar 16, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000005612

1. Corporation Name
RAFMAN CLUB, INCORPORATED

Principal Place of Business 2423 CARIBBEAN COURT ORLANDO FL 32805	Mailing Address 2423 CARIBBEAN COURT ORLANDO FL 32805
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 10/30/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number NOT APPLICABLE Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
	Zip 29	Country 30

9. Name and Address of Current Registered Agent JORDAN, GEORGE 2423 CARIBBEAN COURT ORLANDO FL 32805	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ DATE _____
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	
TITLE	P <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JORDAN, GEORGE	12 NAME	
STREET ADDRESS	2423 CARIBBEAN COURT	13 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32805	14 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COBB, ALBERT	22 NAME	
STREET ADDRESS	1414 SERISSA COURT	23 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32818	24 CITY-ST-ZIP	
TITLE	BM <input type="checkbox"/> DELETE	31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATTERS, MARK R	32 NAME	
STREET ADDRESS	7842 WINTER SONG DR	33 STREET ADDRESS	3210 Cholla Way
CITY-ST-ZIP	ORLANDO FL 32825	34 CITY-ST-ZIP	Orlando, FL 32808
TITLE	D <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JARVIS, ARTHUR	42 NAME	
STREET ADDRESS	1922 FOXBORO DRIVE	43 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	44 CITY-ST-ZIP	32812
TITLE	D <input type="checkbox"/> DELETE	51 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, CLARENCE	52 NAME	
STREET ADDRESS	4601 ROSE CORAL DRIVE	53 STREET ADDRESS	636 Cannon Ridge Dr. #327
CITY-ST-ZIP	ORLANDO FL	54 CITY-ST-ZIP	Orlando, FL 32818
TITLE	D <input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARTER, THOMAS	62 NAME	
STREET ADDRESS	4128 ARAJO COURT	63 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	64 CITY-ST-ZIP	32812-2805

14. I 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, with all other like empowered.

SIGNATURE: George D. Jordan *George D. Jordan* 03/13/99 407-841-8328
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/98)