## **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 # N97000001309 (0)

C. S. LEWIS SOCIETY, INC.

| Principal Place of Business Mailing Address                 |   |                              |   |                                |  |                     |  | ANDE ROOMS DANN O | JULIU JULI JUUL             |  |
|---|---|------------------------------|---|--------------------------------|--|---------------------|--|-------------------|-----------------------------|--|
| 1957 SOURWOOD BOULEVARD<br>DUNEDIN FL 34698                 |   |                              | 1957 SOURWOOD BOULEVARD<br>DUNEDIN FL 34698 |                                |  |                     | 3. Date Incorporated or Qualified 03/10/1997   |                   |                             |  |
|   |   |                              |   |                                |  |                     | 4. FEI Number  | -                 | oplied For<br>ot Applicable |  |
| 2. Principal Place of Business                              |   |                              | 2a. Mailing Address                         |                                |  |                     | S. Certificate of Status Desired   |                   |                             |  |
| Suite, Apt.   | #, etc.   |                              | Suite, Apt. #, etc.                         |                                |  |                     | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees                           |                   |                             |  |
| City & State  |   |                              | City & State                                |                                |  | -                   | 7. Is this nonprofit corporation a homeowners association?   |                   |                             |  |
| Zip   |   |                              |   | <u> </u>                       | Country<br>1                                 |                     | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes W No |                   |                             |  |
| 24 25 29 30 9. Name and Address of Current Registered Agent |   |                              |   |                                | 10. Name and Address of New Registered Agent |                     |  |                   |                             |  |
|   | B. Hamie Elle Fladition of College  |                              |   | 81                             | 81 Name                                      |                     |  |                   |                             |  |
| WOODWARD, THOMAS E  |   |                              |   |                                | 1  | 0                   | (0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0   |                   |                             |  |
| 1957 SOURWOOD BOULEVARD                                     |   |                              |   | 63                             | 1  | Street Addre        | ess (P.O. Box Number is Not Acceptable)  | ··                |                             |  |
| DUNEDIN FL 34698  |   |                              |   |                                |  |                     |  |                   |                             |  |
|   |   |                              |   | 6/                             | 1  | City                | FL   | <b>85</b> Zip     | Code                        |  |
| 11. Pursuant  | to the provisions of Sections 617.05  | 02 and 61                    | 7.1508, Florida Statu                       | tes, the abov                  | /е-і   | named corp          | oration submits this statement for the purpose of  | changing if       | ts registered               |  |
| office or r   | egistered agent, or both, in the Stat<br>m familiar with, and accept the obli | te of Florida<br>gations of, | a. Such change was<br>Section 617.0503, Fi  | authorized b<br>Iorida Statute | yt<br>s.                                     | the corporation     | ion's board of directors. I hereby accept the app  | ointment as       | registered                  |  |
| SIGNATURE   |   | -                            |   |                                |  |                     |  |                   |                             |  |
|   | Signature, typed or printed name of registered a                              |                              |   |                                | ent  | t signature require | ed when reinstating)  DATE  ADDITIONS OF TAXABLE AND   | DIDECTOR          | OC 141 40                   |  |
| 12.   | OFFICERS AI   | ND DIREC                     | DELETE                                      | 13.<br>1.1 TITLE               |  | P/                  | ADDITIONS/CHANGES TO OFFICERS AND  | Change            | Addition                    |  |
| NAME  | WOODWARD, THOMAS E  |                              |   | 1.2 NAME                       |  |                     |  |                   |                             |  |
| STREET ADDRESS 1957 SOURWOOD BOULEVARD                      |   |                              |   | 1.3 STREET ADDRESS             |  |                     | WOODWARD, THOMAS E. 1957 SOURWOOD BOULEVARD  |                   |                             |  |
| I I   | DUNEDIN FL 34698  | TV ID                        |   | 1.4 CITY -                     |  |                     | UNEDIN, FL 34698   |                   |                             |  |
| CITY-ST-ZIP<br>TITLE  | D DONEDIN TE STORE  |                              | DELETE                                      | 2.1 TITLE                      | 31-  |                     | ANEDIA, FC SIETS   | Change            | Addition                    |  |
| NAME  | MCCULLOUGH, JAMES B   |                              |   | 2.2 NAME                       |  |                     |  |                   |                             |  |
| STREET ADDRESS  | 3160 MCMULLEN BOOTH R   | OAD                          |   | 2.3 STREE                      |  | DORESS              |  |                   |                             |  |
| CITY-ST-ZIP   | CLEARWATER FL 34621   | .0,0                         |   | 2 4 CITY                       |  |                     |  |                   |                             |  |
| TITLE   | D   |                              | DELETE                                      | 3.1 TITLE                      |  |                     |  | Change            | Addition                    |  |
| NAME  | CODD, JOHN E  |                              | _   | 3.2 NAME                       |  |                     |  |                   |                             |  |
| STREET ADDRESS  | 2942 MANDARIN HOLLOW  | DRIVE                        |   | 3.3 STREE                      |  | DORESS              |  |                   | i                           |  |
| CITY-ST-ZIP   | JACKSONVILLE FL 32217   |                              |   | 3 4. CfTY                      |  | - 1                 |  |                   | _                           |  |
| TITLE   |   |                              | DELETE                                      | 4.1 TITLE                      |  | D                   |  | Change            | Addition                    |  |
| NAME  |   |                              |   | 4. 2 NAM                       |  |                     | TANIT TO DON'  |                   |                             |  |
| STREET ADDRESS  |   |                              |   | 4.3 STREE                      | TAI  | DDRESS 3            | MITZ, DON<br>SOI LAURELWOOD LANE   | ı.                |                             |  |
| CITY-ST-ZIP   |   |                              |   | 4.4 CITY-                      | ST-  | ZIP V               | ALRICO, FL 33594-5   | 021               |                             |  |
| TITLE   |   |                              | DELETE                                      | 5.1 TITLE                      | _  | าก                  |  | Change            | Addition                    |  |
| NAME  |   |                              |   | 5.2 NAME                       |  | يرسم أ              | MITZ, NANCY  |                   |                             |  |
| STREET ADORESS  |   |                              |   | 5.3 STREE                      | T AI   | DDRESS 🖢 🤧 🚜        | COLLAUREL WOOD LAN   | £                 |                             |  |
| CITY-ST-ZIP   |   |                              |   | 5.4 CITY-                      | ST-  | ·ZIP L              | ALRICO, FL 33594-  | 5021              |                             |  |
| TITLE   |   |                              | ☐ DELETE                                    | 61 TITLE                       |  |                     |  | Change            | Addition                    |  |
| NAME  |   |                              |   | 6.2 NAMÉ                       |  |                     |  |                   |                             |  |
| STREET ADDRESS  |   |                              |   | 6 3 STREE                      | I AI   | DDRESS              |  |                   |                             |  |
| 1   |   |                              |   |                                |  |                     |  |                   |                             |  |

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.

odward Thomas E. Wardward Apr 30'98 813 736-4662

**FILED** 

May 15 1998 8:00am

Secretary of State

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