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Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N97000002229 (9)
 1. Corporation Name
EXCEL ALTERNATIVES, INC.



Principal Place of Business: **520 WEST LAKE MARY BLVD. SANFORD FL 32773**
 Mailing Address: **520 WEST LAKE MARY BLVD. SANFORD FL 32773**

3. Date Incorporated or Qualified: **02/08/1996**
 4. FEI Number: **59-3383506**
 Applied For: Not Applicable:
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
 7. Is this nonprofit corporation a homeowners association? Yes No
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: **21** Suite, Apt. #, etc. **22** City & State **23** Zip **24** Country **25**
 2a. Mailing Address: **26** Suite, Apt. #, etc. **27** City & State **28** Zip **29** Country **30**

9. Name and Address of Current Registered Agent
GIANNONI, TIMOTHY
520 WEST LAKE MARY BLVD.
SUITE 300
SANFORD FL 32773

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BARKER, SANDRA	
STREET ADDRESS	1928 HOWELL BRANCH RD	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BASS, MIKE	
STREET ADDRESS	1155 S SEMORAN BLVD STE 1141	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CHAPMAN, TRACY D	
STREET ADDRESS	P.O. BOX 257 N/A	
CITY-ST-ZIP	OVIEDO FL 32765	
TITLE	P	<input type="checkbox"/> DELETE
NAME	GIANNONI, TIMOTHY	
STREET ADDRESS	520 W. LAKE MARY BLVD. SUITE 300	
CITY-ST-ZIP	SANFORD FL 32773	
TITLE	C	<input type="checkbox"/> DELETE
NAME	HOWELL, JOHN	
STREET ADDRESS	P.O. BOX 633 N/A	
CITY-ST-ZIP	ORLANDO FL 32802	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WINESBURGH, BEVERLY	
STREET ADDRESS	978 DOUGLAS AVENUE	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE: _____ **2/13/98**

CR2E037 (10/97)

**EXCEL ALTERNATIVES, INC.
BOARD OF DIRECTORS**

Director
Dr. Sandra Barker
Eye Associates of Winter Park, Inc.
1928 Howell Branch Road
Winter Park, Fl. 32792

Director
Mike Bass
JMB Financial Group
1155 South Semoran Blvd.
Suite 1141
Winter Park, Fl. 32792

Director
John Howell
Maguire, Voorhis and Wells
P.O. Box 633
Orlando, Fl. 32802

Director
Malcolm MadDiarmid
Suntrust Bank
1723 Golfside Drive
Winter Park, Fl. 32792

Beverly Winesburgh
Product Marketing Group
978 Douglas Avenue
Suite 100
Altamonte Springs, Fl. 32716

Director
Darvin Boothe
Lake Brantley High School
991 Sand Lake Road
Altamonte Springs, Fl. 32714

Director
Ruby Homayssi
Elmire's Pantry
1409 Pylewood Street
Fern Park, Fl. 32730

Director
Joseph Joyner
Orange County Public Schools
445 West Amelia Street
Orlando, Florida 32801

Director
Russell Moncrief
Katie's Wekiva River Landing
190 Katie's Cove
Sanford, Fl. 32771