

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P14678 (7)**

1. Corporation Name

**THE INTERNATIONAL ASSOCIATION OF CANCER VICTORS
AND FRIENDS, INC. CENTRAL FLORIDA CHAPTER**

Principal Place of Business

Mailing Address

**5774 CHIPOLA CIRCLE
ORLANDO FL 32839-4716**

**5774 CHIPOLA CIRCLE
ORLANDO FL 32839-4716**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

06/02/1987

3a. Date of Last Report

05/01/1995

4. FEI Number

95-4068631

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WARMAN, HARRY J
5774 CHIPOLA CIRCLE
ORLANDO FL 32839**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **P D KOONTZ, HARRY**
STREET ADDRESS **5617 CLEARVIEW**
CITY-ST-ZIP **ORLANDO FL**

TITLE ☒ DELETE

NAME **V FINSER, RONNIE**
STREET ADDRESS **1172 GRAND HIGHWAY**
CITY-ST-ZIP **CLERMONT FL 32711**

TITLE ☐ DELETE

NAME **S D DRUGAN, A. HELEN**
STREET ADDRESS **3031 MIDDLESEX ROAD**
CITY-ST-ZIP **ORLANDO FL 32803-1128**

TITLE ☐ DELETE

NAME **T D WARMAN, HARRY J**
STREET ADDRESS **5774 CHIPOLA CIRCLE**
CITY-ST-ZIP **ORLANDO FL**

TITLE ☒ DELETE

NAME **V FINSER, RONNIE**
STREET ADDRESS **1172 GRAND HIGHWAY**
CITY-ST-ZIP **CLERMONT FL 32711**

TITLE ☒ DELETE

NAME **S DRUGAN, A. HELEN**
STREET ADDRESS **3031 MIDDLESEX ROAD**
CITY-ST-ZIP **ORLANDO FL 32803-1128**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**Vice President, D
Marion Ashford
2919 Trentwood Blvd.
Orlando, FL 32839**

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **Harry J. Warman Treas. D**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Harry J. Warman

April 21, 1996
Date
407-859-1931 DRG.
407-855-0180 H.
Daytime Phone #

CS 5/1/96

CR2E037 (12/95)