

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000085763 (9)
1. Corporation Name
20 SOUTH ORANGE AVENUE CORP.

Principal Place of Business
205 SOUTH EOLA DRIVE
ORLANDO FL 32801

Mailing Address
205 SOUTH EOLA DRIVE
ORLANDO FL 32801



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/10/1993	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3222875	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

HARTMAN, JAMES A
205 S. EOLA DRIVE
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title (Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

12.	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
		PST HARTMAN, JAMES A	205 SOUTH EOLA DRIVE	ORLANDO FL 32801	☐
					☐
					☐
					☐
					☐
					☐

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
	1.1				☐	☐	☐
	2.1				☐	☐	☐
	3.1				☐	☐	☐
	4.1				☐	☐	☐
	5.1				☐	☐	☐
	6.1				☐	☐	☐

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 a receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet with an address.

SIGNATURE:

[Handwritten Signature]

CR2E034 (10/97)