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FILED  
May 14 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 # P97000092866 (7)

1. Corporation Name

THE WINNERS' CIRCLE, INC.

Principal Place of Business

5480 HOFFNER AVE., STE. 407  
ORLANDO FL 32812

Mailing Address

5480 HOFFNER AVE., STE. 407  
ORLANDO FL 32812

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/28/1997

4. FEI Number

59-3477039

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

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 5454 HOFFNER AVE

Suite, Apt. #, etc.

22 SUITE 102

City & State

23 ORLANDO FL

Zip

24 32812

Country

2a. Mailing Address

26 P O BOX 720157

Suite, Apt. #, etc.

27

City & State

28 ORLANDO FL

Zip

29 32812-0157

Country

30

9. Name and Address of Current Registered Agent

MOORE, MICHAEL L  
5450 HOFFNER AVE., STE. 303  
ORLANDO FL 32812

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 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, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT & CEO  
NAME ROBERT E LANE  
STREET ADDRESS 12711 BROLEMAN RD  
CITY-ST-ZIP ORLANDO FL 32812

TITLE CFO VICE PRES FINANCE  
NAME LEE A. WEISS  
STREET ADDRESS 1708 WIND WILLOW RD  
CITY-ST-ZIP ORLANDO FL 32809

TITLE CIO VP INFORMATION SYSTEMS  
NAME ROBERT ROBBINS  
STREET ADDRESS 539 TIMBER RIDGE DR  
CITY-ST-ZIP LONGWOOD FL 32779

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)