

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715680

FILED  
Jan 18, 2012  
Secretary of State

**Entity Name:** NORTHWEST ORANGE COUNTY IMPROVEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

4253 PONKAN ROAD  
ZELLWOOD, FL 32798

**New Principal Place of Business:**

4253 W PONKAN ROAD  
ZELLWOOD, FL 32798

**Current Mailing Address:**

4253 PONCAN ROAD  
PO BOX 786  
ZELLWOOD, FL 327987786

**New Mailing Address:**

FEI Number: 59-2022527

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARRETT, MARVIN B  
5101 PALM DR  
ZELLWOOD, FL 32798 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BIRKO, DAVID  
Address: 2829 JUNCTION RD  
City-St-Zip: ZELLWOOD, FL 32798

Title: TD  
Name: HEEKE, JODI  
Address: 4208 ROUND LAKE RD  
City-St-Zip: APOPKA, FL 32712

Title: BD  
Name: HEEKE, TIM  
Address: 4208 ROUND LAKE RD  
City-St-Zip: APOPKA, FL 32712

Title: BD  
Name: SMITH, TERI  
Address: 1258 ADIRONDACK  
City-St-Zip: APOPKA, FL 32712

Title: VP  
Name: MILLER, GARRY  
Address: 222 N KELLY PARK RD  
City-St-Zip: APOPKA, FL 32712

Title: SEC  
Name: ODOM, FAYE  
Address: P O BOX 279  
City-St-Zip: PLYMOUTH, FL 32768

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JODI HEEKE

TREA

01/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date