2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#725308

FILED Apr 28, 2005 Secretary of State

Entity Name: THE ORLANDO CHAPTER OF THE NATIONAL SOCIETY OF THE DAUGHTERS OF THE AMERICAN

REVOLUTION

Current Principal Place of Business: New Principal Place of Business:

800 N HWY 434, SUITE 1 C/O SEABURN, DOUGLAS S ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

800 N HWY 434, SUITE 1
C/O SEABURN, DOUGLAS S
ALTAMONRE SPRINGS, FL 32714 US
800 N HWY 434, SUITE 1
C/O SEABURN, DOUGLAS S
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-6139922 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SEABURN, DOUGLAS S
NORTHWOOD PROFFESIONAL CENTER
800 N HWY 434, SUITE 1
ALTAMONTE SPRINGS, FL 32714 US
SEABURN, DOUGLAS S
NORTHWOOD PROFESSIONAL CENTER
800 N HWY 434, SUITE 1
ALTAMONTE SPRINGS, FL 32714 US

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: 04/28/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: R,PD (X) Change () Addition
Name: HASLER, CLARE Name: HAYNES, CATHERINE
Address: 608 BRECHIN DR Address: 11629 PEACH GROVE LANE

 City-St-Zip:
 WINTER PARK, FL 327924609
 City-St-Zip:
 ORLANDO, FL 328217918

Title: T () Delete Title: VRVP (X) Change () Addition Name: MACLEAN, MARJORY Name: HASLER, CLARE

 Address:
 686 SELKIRK DRIVE
 Address:
 608 BRECHIN DR

 City-St-Zip:
 WINTER PARK, FL 327924640
 City-St-Zip:
 WINTER PARK, FL 327924609

 Name:
 HAYNES, CATHERINE
 Name:
 MACLEAN, MARJORY

 Address:
 11629 PEACH GROVE LANE
 Address:
 686 SELKIRK DRIVE

City-St-Zip: ORLANDO, FL 328217918 City-St-Zip: WINTER PARK, FL 327924640

Title: VR (X) Delete Title: () Change () Addition

 Name:
 CAMPBELL, KELLY
 Name:

 Address:
 1307 PINAR DR
 Address:

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:

Title: PD (X) Delete Title: () Change () Addition

 Name:
 HAYNES, CATHERINE
 Name:

 Address:
 11629 PEACH GROVE LANE
 Address:

 City-St-Zip:
 ORLANDO, FL 328217918
 City-St-Zip:

Title: VPD (X) Delete Title: () Change () Addition

 Name:
 CAMPBELL, KELLY
 Name:

 Address:
 1307 PINAR DR
 Address:

 City-St-Zip:
 ORLANDO, FL 328257814
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CATHERINE D. HAYNES R,PD 04/28/2005

Electronic Signature of Signing Officer or Director

Date