

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725308

FILED  
Apr 25, 2007  
Secretary of State

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

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

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

SEABURN, DOUGLAS S  
NORTHWOOD PROFESSIONAL CENTER  
800 N HWY 434, SUITE 1  
ALTAMONTE SPRINGS, FL 32714 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: RP ( ) Delete  
Name: HASLER, CLARE  
Address: 608 BRECHIN DR  
City-St-Zip: WINTER PARK, FL 327924609

Title: VRVP ( ) Delete  
Name: MACINTOSH, ELIZABETH  
Address: 531 SELKIRK DR  
City-St-Zip: WINTER PARK, FL 327924635

Title: T ( ) Delete  
Name: AUSTIN, JANIS  
Address: 4701 PORT KNOX CT  
City-St-Zip: ORLANDO, FL 328227176

Title: AT ( ) Delete  
Name: MACLEAN, MARJORY  
Address: 686 SE KIRK DR  
City-St-Zip: WINTER PARK, FL 327924640

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: AUSTIN, JANIS  
Address: 4701 FORT KNOX CT  
City-St-Zip: ORLANDO, FL 328227176

Title: AT (X) Change ( ) Addition  
Name: MACLEAN, MARJORY  
Address: 686 SELKIRK DR  
City-St-Zip: WINTER PARK, FL 327924640

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JANIS C. AUSTIN

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04/25/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date