2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734502

FILED Jan 29, 2012 Secretary of State

Entity Name: SPINA BIFIDA ASSOCIATION OF CENTRAL FLORIDA, INC.

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

347 WEST LAKE FAITH DR. 3262 LORIMAR LANE

MAITLAND, FL 32751 US ST. CLOUD, FL 34772 US

Current Mailing Address: New Mailing Address:

P.O. BOX 700536 ST CLOUD, FL 34769

FEI Number: 59-1804997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STEBBINS RUSNAK, CINDY
347 WEST LAKE FAITH DR.
MAITLAND, FL 32751 US
BRUNER, PATRICIA M
1311 BLAKEMORE COURT
TALLAHASSEE, FL 32317 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: PATRICIA M. BRUNER 01/29/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: COB

 Name:
 GOWER, NICOLE V

 Address:
 3262 LORIMAR LANE

 City-St-Zip:
 ST. CLOUD, FL 34772

Title: S

Name: MURILLO-ARISTONDO, LISSETTE
Address: 83 W. COLUMBIA STREET
City-St-Zip: ORLANDO, FL 32806

Title: VCOB

Name: ROY, ROBERT A
Address: 915 LUCERNE TERRACE
City-St-Zip: ORLANDO, FL 32806

Title: T

Name: BRUNER, PATRICIA M Address: 1311 BLAKEMORE COURT City-St-Zip: TALLAHASSEE, FL 32317

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: PATRICIA M. BRUNER T 01/29/2012