

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762699

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** ORANGE COUNTY BAR ASSOCIATION FOUNDATION, INC.

**Current Principal Place of Business:**

880 N ORANGE AVENUE #100  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 530085  
ORLANDO, FL 328530085

**New Mailing Address:**

**FEI Number:** 59-2215141

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ORANGE COUNTY BAR ASSOCIATION, INC.  
880 N ORANGE AVENUE #100  
ORLANDO, FL 32801 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 ( ) Delete  
Name: WERT, THOMAS P  
Address: 301 E. PINE ST STE 730  
City-St-Zip: ORLANDO, FL 32801

Title: VP ( ) Delete  
Name: SUBLETTE, WILLIAM E  
Address: 250 NORTH ORANGE AVENUE, SUITE 1220  
City-St-Zip: ORLANDO, FL 32801

Title: T ( ) Delete  
Name: DIEGE, RODRIGUEZ WOODY  
Address: 976 LAKE BALDWIN LN STE 101  
City-St-Zip: ORLANDO, FL 32814

Title: D ( ) Delete  
Name: UMANSKY, WILLIAM D  
Address: 1500 EAST ROBINSON STREET  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: SHIPLEY, C.G.  
Address: 234 NORTH WESTMONTE DR SUITE 3000  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: ED ( ) Delete  
Name: BITTNER, BRANT S  
Address: 880 N ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

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

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

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

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

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

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

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

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: BRANT S. BITTNER

ED

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date