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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

			DIVISION		DMATIONS						
DOCUI 1. Corporation	MENT #	768343	(6	)							
,		OF GREATER	ORLANDO, INC								
Principal Place	of Business		Mailing Address								OTOK OLDAN IJAN
C/O MICHAE	EL BEAUDINE		C/O MICHAEL BE	AUDINE							
924 BOARDMAN ST ORLANDO FL 32804			924 BOARDMAN ST ORLANDO FL 32804			ľ					
ORLANDO FI	L 32004		URLANDO FL 32	104		3	Date Incorporated or Qua 05/09/1983	lified	3a. Date of 08/	Last F	
¬ `	ace of Business		2a. Mailing Address			4	FEI Number				pplied For
Suite, Apt. +	#. etc.		26 Suite, Apt. #, et			ļ. <u></u> ,	31-1075398				lot Applicable
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ק <u>ר</u> י	25	ouritry	Zip 29	30	ountry	8	<ul> <li>This corporation has liabili Florida Statutes</li> </ul>	ty for intar	ngible tax und Yes <b>W</b> No	er s. '	199.032,
		ddress of Current F			<u> </u>	10	Name and Address of N			<u>-</u>	
					81 Nam			· -			
	NE, MICHAEL				82 Stre	et Address (F	P.O. Box Number is Not Acc	eptable)			· · · · · · · · · · · · · · · · · · ·
	ARDMAN ST					,					
ORLAND	DO FL 32804				83						
					84 City				<b></b> 65	Zip	Code
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11. Pursuant t	to the provisions of	Sections 617 0502 or	d 617 1609 Florida C	otutoo the e					<u> </u>	<u> </u>	
					bove-named e corporation	corporation :	submits this statement for the	ne purposa appointn		its re- ered a	gistered office agent. I am
familiar wit			nd 617.1508, Florida S Such change was aut 617.0503, Florida Sta		bove-named e corporation	corporation : o's board of o	submits this statement for the directors. I hereby accept the	ne purposi e appointn		its re- ereci s	gistered offic agent. I am
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael Q. Beaudine SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR