

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F62240

FILED
Jan 12, 2009
Secretary of State

Entity Name: PENSION INVESTORS CORPORATION OF ORLANDO INCORPORATED

Current Principal Place of Business:

220 CENTRAL PARKWAY
SUITE 3040
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

220 CENTRAL PARKWAY
SUITE 3040
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 59-2166422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESSETT, TIMOTHY L
220 E. CENTRAL PARKWAY
STE 3040
ALTAMONTE SPRINGS, FL 32701 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MESSETT, TIMOTHY L
Address: 6854 S ATLANTIC AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: VP () Delete
Name: WIENER, LAWRENCE
Address: 3981 N. 32ND TERRACE
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: T () Delete
Name: WREN, BRENDA W
Address: 351 MAGNOLIA PLACE
City-St-Zip: DEBARY, FL 32713 US

Title: S () Delete
Name: STEVENS, KATHLEEN L
Address: 604 PINTO COURT SOUTH
City-St-Zip: WINTER SPRINGS, FL 32708 US

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENDA W WREN

T

01/12/2009

Electronic Signature of Signing Officer or Director

Date