

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2004 8:00 am**  
**Secretary of State**

04-27-2004 90090 014 \*\*\*\*70.00

**DOCUMENT # N03000001170**

1. Entity Name  
**ORLANDO REGIONAL CORPORATE VOLUNTEER  
COUNCIL, INC.**



Principal Place of Business  
**1000 UNIVERSAL STUDIOS PLAZA  
UNIVERSAL ORLANDO  
ORLANDO, FL 32819**

Mailing Address  
**1000 UNIVERSAL STUDIOS PLAZA  
UNIVERSAL ORLANDO  
ORLANDO, FL 32819**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04152004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number

**45-0504635**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**YOUNG, DIANE  
1000 UNIVERSAL STUDIOS PLAZA  
UNIVERSAL ORLANDO  
ORLANDO, FL 32819**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **YOUNG, DIANE**  
STREET ADDRESS **1000 UNIVERSAL STUDIOS PLAZA**  
CITY-ST-ZIP **ORLANDO, FL 32819**

TITLE **D** ☐ Delete  
NAME **HUNGATE, VICKIE**  
STREET ADDRESS **PO BOX 3193**  
CITY-ST-ZIP **ORLANDO, FL 32802**

TITLE **D** ☐ Delete  
NAME **KUPPER, JENNIFER**  
STREET ADDRESS **PO BOX 10,000**  
CITY-ST-ZIP **LAKE BUENA VISTA, FL 32810**

TITLE **D** ☐ Delete  
NAME **KUPPER, JENNIFER**  
STREET ADDRESS **PO BOX 10,000**  
CITY-ST-ZIP **LAKE BUENA VISTA, FL 32810**

TITLE **D** ☐ Delete  
NAME **KUPPER, JENNIFER**  
STREET ADDRESS **PO BOX 10,000**  
CITY-ST-ZIP **LAKE BUENA VISTA, FL 32810**

TITLE **D** ☐ Delete  
NAME **KUPPER, JENNIFER**  
STREET ADDRESS **PO BOX 10,000**  
CITY-ST-ZIP **LAKE BUENA VISTA, FL 32810**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Director** ☐ Change ☒ Addition  
NAME **Raquel Berberena**  
STREET ADDRESS **14961 S-Orange Blossom Trail**  
CITY-ST-ZIP **Orlando, FL 32837**

TITLE **Director** ☐ Change ☒ Addition  
NAME **Monroe Harrison**  
STREET ADDRESS **20 N-Orange Avenue**  
CITY-ST-ZIP **Orlando, FL 32801**

TITLE **Director** ☐ Change ☒ Addition  
NAME **Scott Bowman**  
STREET ADDRESS **8701 Maitland Summit Blvd**  
CITY-ST-ZIP **Maitland, FL 32810**

TITLE **Director** ☐ Change ☒ Addition  
NAME **Kevin Watson**  
STREET ADDRESS **5601 Windhover Dr.**  
CITY-ST-ZIP **Orlando, FL 32819**

TITLE **Director** ☐ Change ☒ Addition  
NAME **Sheri Austin**  
STREET ADDRESS **P.O. Box 1650**  
CITY-ST-ZIP **Altamonte Springs, FL 32703**

TITLE **Director** ☐ Change ☒ Addition  
NAME **Deborah Richard**  
STREET ADDRESS **1000 AAA Drive MS 75**  
CITY-ST-ZIP **Heathrow, FL 32746**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Diane Young**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/15/04**  
Date

**407-224-5690**  
Daytime Phone #