

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002615

FILED
Aug 22, 2012
Secretary of State

Entity Name: FEDERAL BAR ASSOCIATION/ORLANDO CHAPTER, INC.

Current Principal Place of Business:

180 N. PARK AVE., STE. 200
WINTER PARK, FL 327897401

New Principal Place of Business:

200 SOUTH ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801

Current Mailing Address:

180 N. PARK AVE., STE. 200
WINTER PARK, FL 327897401

New Mailing Address:

200 SOUTH ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801

FEI Number: 20-5265189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORRELL, DREW MR.
450 SOUTH ORANGE AVENUE
SUITE 250
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

WATSON, COLEMAN W
200 SOUTH ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801 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: COLEMAN W. WATSON

08/22/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: SKUTHAN, JAMES T
Address: 201 SOUTH ORANGE AVENUE SUITE 300
City-St-Zip: WINTER PARK, FL 32801

Title: VPD
Name: VITALE, MICHAEL S
Address: 200 SOUTH ORANGE AVENUE, SUITE 2300
City-St-Zip: ORLANDO, FL 32801

Title: 2VPD
Name: NEWCOMER, SARAH R
Address: 200 SOUTH ORANGE AVENUE, SUITE 2300
City-St-Zip: ORLANDO, FL 32801

Title: 3VPD
Name: ZITZKA, JOSEPH
Address: 215 N. EOLA DRIVE
City-St-Zip: ORLANDO, FL 32801

Title: SEC
Name: RHODEN, REBECCA
Address: 215 N. EOLA DRIVE
City-St-Zip: ORLANDO, FL 32801

Title: TRES
Name: WATSON, COLEMAN W
Address: 200 SOUTH ORANGE AVENUE, SUITE 2300
City-St-Zip: ORLANDO, FL 32801

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: MICHAEL S. VITALE

VPD

08/22/2012

Electronic Signature of Signing Officer or Director

Date