

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31232

FILED
Mar 19, 2008
Secretary of State

Entity Name: PLANNED GIVING COUNCIL OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

C/O STEPHEN DUNEGAN ESQ, 800 N MAGNOLIA AV
1500
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

C/O STEPHEN DUNEGAN ESQ, 800 N MAGNOLIA AV
1500
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-2936260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNEGAN, STEPHEN D
800 N MAGNOLIA AVE
SUITE 1500
ORLANDO, FL 32803 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: VD () Delete
Name: CECCHETTI, STEVE
Address: 480 WEST CENTRAL PARKWAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: PD () Delete
Name: TAVRIDES, MATT
Address: 1560 ORANGE AVE, SUITE 200
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: DUNEGAN, STEPHEN D
Address: 800 NORTH MAGNOLIA AVE, SUITE 1500
City-St-Zip: ORLANDO, FL 32803

Title: SD () Delete
Name: WALES, MICHELE
Address: 1000 LEGION PLACE SUITE 701
City-St-Zip: ORLANDO, FL 32801

Title: TD () Delete
Name: MARSHALL, CANDACE
Address: PO BOX 620005
City-St-Zip: ORLANDO, FL 32862

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:

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: STEPHEN D DUNEGAN

D

03/19/2008

Electronic Signature of Signing Officer or Director

Date