2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N48419

1. Entity Name

CENTRAL ELORIDA REALTY INVESTORS ASSOCIATION. IN



02-03-2003 90141 008 ****61.25

Feb 03, 2003 8:00 am Secretary of State

FILED

C.		
Principal Place of Business	Mailing Address	
380 S. SR 434 #1004-260 ALTAMONTE SPRINGS FL 32714 US	380 S. SR 434 #1004-260 ALTAMONTE SPRINGS FL 32714 US	
2. Principal Place of Business	3. Mailing Address	
Cuito Apt # oto	Cuite Ant # ste	

|--|--|

Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 59-3117856 City & State City & State Applied For Not Applicable Zip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KANAGA, RICK Street Address (P.O. Box Number is Not Acceptable) 491 N. SR 434 **STE 125 ALTAMONTE SPRINGS FL 32714** City 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 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 **\$5.00** May Be Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITLE TITLE ☐ Addition Kanaga Ryan 491 N.S.R. 434, #125 williams, duane× NAME NAME 604-114-CHESTNUT OAK CIRCLE STREET ADDRESS STREET ADDRESS PORT ORANGE FL 32019 Altamonte Springs, FL 32714 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Laster Rosie 48150 Myrtle Bay Drive TOLBERT, ANDY NAME NAME 321 KINGSBURY AVENUE STREET ADDRESS STREET ADDRESS Orlando FL 32829-8701 CITY-ST-ZIP SANFORD PL 32771 CITY-ST-ZIP Delete TITLE Change . Addition Elizabeth Freiberg 1508 Virginia Ave, #4-14 Daytonl Beach, FL 32114 Kanaga, Ryan— NAME NAME 491 N. SR 434, STE 125 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 CITY-ST-ZIP **VPD** Delete TITLE ∠Change ☐ Addition Andy Tolbert 321 Kingsbury Ave Sanfort, FL 32771 LARIBE, JACK NAME STREET ADDRESS 410 ADGAZĀR AVE STREET ADDRESS CITY-ST-ZIP altámonte springs fl CITY-ST-ZIP TITLE Delete TITLE ☐ Change **X**Addition ORMAN, MARKS Fern Burr NAME Fern Burr 602 W. 27 th St. Sanford, FL 32773 NAME 5913 SIR-HENRY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32808 CITY-ST-ZIP TITLE Delete TITLE ☐ Change **△**Addition Robin Butler 722 Commerce Circle Longwood, FL 32750 L'ASTER, ROSHE NAME NAME 48150-MYRTLE-BAY DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32829-8701 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 is 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 of 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

407-862-2292