

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 700189

**Entity Name:** ROSALIND CLUB OF ORLANDO

**Current Principal Place of Business:**

ROSALIND CLUB OF ORLANDO  
11 N ROSALIND AVE  
ORLANDO, FL 32801

**Current Mailing Address:**

ROSALIND CLUB OF ORLANDO  
11 N ROSALIND AVE  
ORLANDO, FL 32801

**FEI Number:** 59-0539680

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LONG, LYNN L  
100 SOUTH EOLA DRIVE  
1403  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name KEIFFER, NANCY  
Address 1711 SANTA MARIA PLACE  
City-State-Zip: ORLANDO FL 32806

Title D  
Name HARTSAW, JEAN  
Address 1812 ANTILLES PLACE  
City-State-Zip: ORLANDO FL 32803

Title D  
Name RODDY, ELLEN  
Address 925 NORTH WESTMORELAND  
City-State-Zip: ORLANDO FL 32804

Title D  
Name LUFF, ANN M  
Address 2510 FOREST CLUB DRIVE  
City-State-Zip: ORLANDO FL 32804

Title D  
Name RUFFIER, KIMBERLY  
Address 3039 MIDDLESEX ROAD  
City-State-Zip: ORLANDO FL 32803

*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:** ANN LUFF

**DIRECTOR**

**03/21/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date