

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709643

Entity Name: CENTRAL FLORIDA COUNCIL BOY SCOUTS OF AMERICA, INC.**Current Principal Place of Business:**1951 SOUTH ORANGE BLOSSOM TRAIL
APOPKA, FL 32703-7747**Current Mailing Address:**1951 SOUTH ORANGE BLOSSOM TRAIL
APOPKA, FL 32703-7747**FEI Number:** 59-0624376**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RON A. OATS
1951 S. ORANGE BLOSSOM TRAIL
SUITE 102
APOPKA, FL 32703-7747 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	T
Name	PALVISAK, KARL
Address	618 E SOUTH STREET
City-State-Zip:	ORLANDO FL 32801

Title	VP
Name	SUBLETTE, WILLIAM
Address	250 N. ORANGE AVE, SUITE 1220
City-State-Zip:	ORLANDO FL 32801

Title	SE
Name	OATS, RON A.
Address	13856 GLYNSHEL DR
City-State-Zip:	WINTER GARDEN FL 34787

Title	ASE
Name	GOSSELIN, WILLIAM
Address	2748 LOGANDALE DRIVE
City-State-Zip:	ORLANDO FL 32817

Title	VP
Name	JENNINGS, JEFF
Address	1030 WILFRED DR.
City-State-Zip:	ORLANDO FL 32803

Title	PRESIDENT
Name	UTSEY, ROBERT
Address	111 N. MAGNOLIA AVE., SUITE 1150
City-State-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: HENRY KNOWLES**BUSINESS MANAGER****02/24/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date