

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712026

Entity Name: WORLDORLANDO, INC.**Current Principal Place of Business:**4297 ANDROMEDA LOOP N., 202
ORLANDO, FL 32816-0003**Current Mailing Address:**4297 ANDROMEDA LOOP N., 202
ORLANDO, FL 32816-0003 US**FEI Number: 59-1837575****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CHASTANG, LAWRENCE J
100 W LUCERNE CIRCLE, STE 501
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	VICE CHAIR / PRESIDENT
Name	TURK, ROBERT
Address	300 N. PARK AVE.
City-State-Zip:	SANFORD FL 32772

Title	CHAIR EMERITUS / TREASURER
Name	CHASTANG, LAWRENCE
Address	100 W LUCERNE CIRCLE, STE 501
City-State-Zip:	ORLANDO FL 32801

Title	BOARD MEMBER
Name	GRABUSKAS, CAROL
Address	3447 FORSYTHE TERRACE
City-State-Zip:	THE VILLAGES FL 32162

Title	SECRETARY
Name	FLORES, CYNTHIA
Address	390 NORTH ORANGE AVE, 9TH FLOOR
City-State-Zip:	ORLANDO FL 32801

Title	EXECUTIVE DIRECTOR
Name	GAL, SARAH RIDLEY
Address	4297 ANDROMEDA LOOP N., 202
City-State-Zip:	ORLANDO FL 32816-0003

Title	BOARD MEMBER
Name	LY, RICKY Q
Address	11002 INSIDE LOOP
City-State-Zip:	ORLANDO FL 32825

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: SARAH RIDLEY GAL**EXECUTIVE DIRECTOR, 02/05/2024
WORLDORLANDO**_____
Electronic Signature of Signing Officer/Director Detail_____
Date