

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747162

Entity Name: CENTRAL FLORIDA ESTATE PLANNING COUNCIL, INC.

FILED
May 06, 2015
Secretary of State
CC3761025101

Current Principal Place of Business:

400 PARK AVENUE S.
2ND FLOOR
WINTER PARK, FL 32789

Current Mailing Address:

400 PARK AVENUE S.
2ND FLOOR
WINTER PARK, FL 32789 US

FEI Number: 59-3351739

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRURY, AMELIA A
400 PARK AVENUE S.
2ND FLOOR
WINTER PARK, FL 32789 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 PD
Name BABIONE, MARCIA
Address 4060 EDGEWATER DRIVE
City-State-Zip: ORLANDO FL 32804

Title VD
Name LEE FATT, KAREN
Address 714 NORTH DONNELLY STREET
City-State-Zip: MOUNT DORA FL 32756

Title VD
Name AHEARN, MATTHEW
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1500
City-State-Zip: ORLANDO FL 32803

Title SD
Name SOLASH-REED, LINDA
Address 871 OUTER ROAD
SUITE C
City-State-Zip: ORLANDO FL 32814

Title TD
Name SLANE, ROBERT
Address 280 W. CANTON AVENUE
SUITE 230
City-State-Zip: WINTER PARK FL 32789

Title AS
Name DRURY, AMELIA A
Address 400 PARK AVE., SOUTH, 2ND FLOOR
City-State-Zip: WINTER PARK FL 32789

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: MARCIA BABIONE

PRESIDENT

05/06/2015

Electronic Signature of Signing Officer/Director Detail

Date