

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00266

**FILED**  
**Apr 23, 2024**  
**Secretary of State**  
**9453212928CC**

**Entity Name:** ORLANDO CHAPTER OF THE AMERICAN INSTITUTE OF ARCHITECTS INC.

**Current Principal Place of Business:**

625 VIRGINIA DRIVE  
ORLANDO, FL 32803

**Current Mailing Address:**

625 VIRGINIA DR  
ORLANDO, FL 32803 US

**FEI Number: 59-2721141**

**Certificate of Status Desired: No**

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

SCARBORO, GARY  
625 VIRGINIA DR  
ORLANDO, FL 32803 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: GARY SCARBORO**

**04/23/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           DAWSON, KELLY  
Address        625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title           STATE DIRECTOR  
Name           PEREZ, LINDSEY PIANT  
Address        625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title           DIRECTOR, EXECUTIVE  
Name           SCARBORO, GARY  
Address        625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title           PRESIDENT  
Name           LOZADA, ITZEL  
Address        625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title           PRESIDENT ;ELECT  
Name           STRAUGHN, ALEXANDER  
Address        625 VIRGINIA  
City-State-Zip: ORLANDO FL 32803

Title           SECRETARY  
Name           AUFFANT, GABRIEL  
Address        625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title           DIRECTOR  
Name           ROVNER, LISA  
Address        625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title           PAST PRESIDENT  
Name           JOHNSON, TIM  
Address        625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

**Continues on page 2**

*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: GARY SCARBORO**

**EXECUTIVE DIRECTOR**

**04/23/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name RICHARDSON, MICHAEL  
Address 625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name BOUT, SETH  
Address 625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title EMERGING PROFESSIONALS DIRECTOR  
Name ALAI, AUDREY  
Address 625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title ALLIED DIRECTOR  
Name MARTIN, WADE  
Address 625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803

Title GENERAL COUNSEL  
Name MOHRE, FRED  
Address 625 VIRGINIA DR  
City-State-Zip: ORLANDO FL 32803