

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

DOCUMENT# N09000003940

**Entity Name:** FIRST TEE OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

9685 LAKE NONA VILLAGE PLACE  
SUITE 205  
ORLANDO, FL 32827

**Current Mailing Address:**

9685 LAKE NONA VILLAGE PLACE  
SUITE 205  
ORLANDO, FL 32827

**FEI Number:** 27-0149539

**Certificate of Status Desired:** No

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

CORPORATION COMPANY OF ORLANDO  
300 S. ORANGE AVENUE  
SUITE 1000 (M7C)  
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            PRESIDENT, DIRECTOR  
Name            CERTO, MATT  
Address        4776 NEW BROAD STREET, SUITE  
                  100  
City-State-Zip: ORLANDO FL 32814

Title            SECRETARY, DIRECTOR  
Name            PAPE, SARAH A  
Address        315 E. ROBINSON STREET, SUITE 600  
City-State-Zip: ORLANDO FL 32801

Title            TREASURER, DIRECTOR  
Name            JOHNSTON, JON  
Address        12639 HADDON DRIVE  
City-State-Zip: WINDERMERE FL 34786

Title            VP, DIRECTOR  
Name            WALKER, SCOTT  
Address        7580 GOLF CHANNEL DRIVE  
City-State-Zip: ORLANDO FL 32819

*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 PAPE

**SECRETARY**

**03/15/2013**

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

\_\_\_\_\_  
Date