

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005774

Entity Name: OPERA ORLANDO, INC.**Current Principal Place of Business:**501 EAST CHURCH STREET
ORLANDO, FL 32801**Current Mailing Address:**P.O. BOX 553374
ORLANDO, FL 32853-3974 US**FEI Number:** 27-0406958**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PREISSER, GABRIEL
501 EAST CHURCH ST
ORLANDO, FL 32804 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:** GABRIEL PREISSER

03/18/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title S
Name MEIJER, CAROL
Address 766 PENNSYLVANIA AVE
City-State-Zip: WINTER PARK FL 32789

Title V
Name WILKES, RITA
Address 1811 WYCLIFF DRIVE
City-State-Zip: ORLANDO FL 32803

Title S
Name FOX, ANN C
Address 4706 FORELAND PL
City-State-Zip: ORLANDO FL 32812

Title 2ND VIVE PRESIDENT
Name PENFIELD, AARON
Address 218 WEST PAR STREET
City-State-Zip: ORLANDO FL 32804

Title T
Name THOMPSON, JUDITH H
Address 210 PINE CONE LANE
City-State-Zip: LONGWOOD FL 32779

Title P
Name WETTACH, JOHN T JR.
Address 1306 GREEN COVE RD
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name LOVETT, CHEVALIER
Address 5222 COMSTOCK AVE
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name MILLER, KATHLEEN
Address 2203 VIA TUSCANY
City-State-Zip: WINTER PARK FL 32789

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: JUDITH H. THOMPSON

TREASURER

03/18/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PEREZ RAMIERZ, MARIA DE LOURDES
Address P.O. BOX 621133
City-State-Zip: ORLANDO FL 32862

Title DIRECTOR
Name RUDEZ, JULIA
Address 826 LAKE ADAIR BLVD
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR
Name SHARPE, DEEDE
Address 1599 HIGHLAND ROAD
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name ABRAHAMSON, MARILYN
Address 428 BARCLAY AVE
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR
Name BREMER, SHERRY
Address 822 NOTTINGHAM STREET
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name WAGES, NANCY
Address 2932WESTCHESTER AVE
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name ENGELHARDT, PATRICIA
Address 2248 ARGO WOOD WAY
City-State-Zip: APOPKA FL 32712

Title DIRECTOR
Name DIAZ, LETICIA
Address 1415 SLIGH
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name ROBBINSON, BARBARA
Address 100 SOUTH EOLA DRIVE
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name POTTER, THOMAS
Address 12429 MARLEIGH CT
City-State-Zip: ORLANDO FL 32828

Title DIRECTOR
Name PARKER, JOHN
Address 1599 HIGHLAND ROAD
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name BARBER, FRANK
Address 496 PALM SPRINGS DRIVE
STE137
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR
Name CUZ, DANNY
Address 8003 BAYSIDE DRIVE
City-State-Zip: OELANDO FL 32819

Title DIRECTOR
Name DUPONT, ALECIA
Address 8039 CANYON LAKE CIRCLE
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name ZILIOLO, ARMAND DR.
Address 1920 LEGION DRIVE
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name WIRTZ, GAYLE
Address 2838 KEMPER AVE
City-State-Zip: ORLANDO FL 32814