2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000004146

Entity Name: FROM OUTSIDE IN INC

Current Principal Place of Business:

2800 NORTH ORANGE AVE ORLANDO, FL 32804

Current Mailing Address:

2800 NORTH ORANGE AVE ORLANDO, FL 32804 US

FEI Number: 47-1024452 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPELES, KRIZIA 2800 NORTH ORANGE AVE 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:

Electronic Signature of Registered Agent

Date

WINTER PARK FL 32789

City-State-Zip:

FILED Apr 16, 2018

Secretary of State

CC4488111826

Officer/Director Detail :

Title **SECRETARY** Title VICE CHAIR CAPELES, JAMES SCIPIO, CARY Name Name

4800 PIERCE ARROW DRIVE 4800 PIERCE ARROW DRIVE Address Address

City-State-Zip: APOPKA FL 32712 APOPKA FL 32712 City-State-Zip:

Title **TREASURER** Title **EXECUTIVE DIRECTOR**

Name JOHNSON, PENNY J Name CAPELES, KRIZIA Address 1665 PINE AVENUE Address 2615 MAITLAND CROSSING WAY 9-

306

ORLANDO FL 32810 City-State-Zip:

Title FINANCE CHAIR

Title **CHAIR** Name DURKEE, TOM Name NEWELL, JOSANN

Address 1720 WEST IVANHOE BLVD. Address 3319 HERRINGRIDGE DR

City-State-Zip: ORLANDO FL 32804 City-State-Zip: ORLANDO FL 32812

Title **BOARD MEMBER** Name CREEK, GREG

Address 1008 DUPONT AVENUE

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.

04/16/2018 SIGNATURE: KRIZIA CAPELES EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date