

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000008229

Entity Name: CENTRAL FLORIDA NORML INC.

Current Principal Place of Business:

2723 WEST HENRY AVE
TAMPA, FL 33614

Current Mailing Address:

2723 WEST HENRY AVE
TAMPA, FL 33614 US

FEI Number: 47-1806243

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CANO, CHRISTOPHER C
1529 WEST RIVER LANE
TAMPA, FL 33603 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 E.D.
Name CANO, CHRIS
Address 1529 WEST RIVER LANE
City-State-Zip: TAMPA FL 33603

Title D.D.
Name HERMIDA, CARLOS
Address 705 NW 177 AVE
City-State-Zip: PEMBROKE PINES FL 33029

Title D.M.
Name BURT, CLIFF
Address 10438 ASHLEY OAKS DV
City-State-Zip: RIVERVIEW FL 33578

Title D.C.
Name JAUREGUI, ALBERTO
Address 5194 SUNRIDGE PALMSX DRIVE
City-State-Zip: TAMPA FL 33617

Title T.
Name JONES, MORRIS
Address 3433 LITHIA PINECREST RD
City-State-Zip: VALRICO FL 33596

Title DIRECTOR OF EVENTS
Name RHONDA ABDALLA
Address 5621 PINNACLE HEIGHTS CIRCLE
UNIT 202
City-State-Zip: TAMPA FL 33624

Title EXECUTIVE SECRETARY
Name ALEXEI NOVITZKY
Address 4513 N FLORIDA AVE
City-State-Zip: TAMPA FL 33603

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: CARLOS JOSE ANGEL HERMIDA

DEPUTY DIRECTOR

05/04/2016

Electronic Signature of Signing Officer/Director Detail

Date