

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000009413

Entity Name: ORGANIZATION OF INDEPENDENT FILMMAKERS, INC.

FILED
Apr 26, 2023
Secretary of State
9195315687CC

Current Principal Place of Business:

C/O JOSEPH O'CONNOR
3569 CRYSTAL STREET
GOTHA, FL 34734

Current Mailing Address:

C/O LENNY LORUSSO
391 HICKORY DR
MAITLAND, FL 32751 US

FEI Number: 84-2893881

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LORUSSO, TZVIA
391 HICKORY DRIVE
MAITLAND, FL 32751 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 DIRECTOR, PRESIDENT, CHAIRMAN
Name LORUSSO, LEONARDO
Address 391 HICKORY DR.
City-State-Zip: MAITLAND FL 32751

Title VP
Name LORUSSO, TZVIA
Address 391 HICKORY DR.
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name DANIELLE, BOWMAN
Address 216 BROM BONES LANE
City-State-Zip: LONGWOOD FL 32750

Title DIRECTOR
Name GREGORY, JASON D
Address 125 OAK BEND CT.
City-State-Zip: OVIEDO FL 32765

Title DIRECTOR
Name EGGLESTON, MARIANNE
Address 332 E. KENNEDY BLVD.
#2586
City-State-Zip: EATONVILLE FL 32751-9991

Title DIRECTOR, TREASURER
Name O'CONNOR, JOSEPH
Address 3569 CRYSTAL STREET
City-State-Zip: GOTHA FL 34734

Title DIRECTOR
Name HABER, LAWRENCE
Address 6 ESCONDIDO CIRCLE
SUITE 55
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title SECRETARY
Name LE DIX, NILDA
Address 6484 SW 107TH PL.
City-State-Zip: OCALA FL 34476

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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: LEONARDO LORUSSO

PRESIDENT

04/26/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LORI, TURCHIN M
Address 4313 HURD AVE
City-State-Zip: ORLANDO FL 32812

Title DIRECTOR
Name WILL, COVINGTON M
Address 6410 SAND LAKE SOUND ROAD
 #126
City-State-Zip: ORLANDO FL 32819