2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2025
Secretary of State
7536444551CC

DOCUMENT# N95000003974

Entity Name: ORLANDO AFTER-SCHOOL ALL-STARS, INC.

Current Principal Place of Business:

595 N PRIMROSE DR
ORLANDO, FL 32803

Current Mailing Address:

595 N PRIMROSE DR
ORLANDO, FL 32803 US

FEI Number: 59-3313614

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ARROW, COLBY
333 S GARLAND AVE
SUITE 1700
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: COLBY ARROW 02/26/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEO
Name	TYLER, CHANDLER
Address	595 N PRIMROSE DR
City-State-Zip:	ORLANDO FL 32803

Title	DIRECTOR
Name	KITTINGER, FRED
Address	P.O. BOX 160040
City-State-Zip:	ORLANDO FL 32816

Title	DIRECTOR
Name	ORTIZ, TONY
Address	400 S ORANGE AVE, 2ND FL
City-State-Zip:	ORLANDO FL 32801

Title	DIRECTOR
Name	BULLOCK, CLINTON
Address	100 W ANDERSON STREET
City-State-Zip:	ORLANDO FL 32801

Title	DIRECTOR
Name	ARROW, COLBY
Address	850 CONCOURSE PARKWAY S SUITE 200
City-State-Zip:	MAITLAND FL 32751

Title	DIRECTOR
Name	KEFAUVER, JOE
Address	2106 N ORANGE AVE SUITE 200
City-State-Zip:	ORLANDO FL 32804

Title	DIRECTOR, VC
Name	PRANIEWICZ, KIM
Address	725 LAKE HIAWASSEE DRIVE
City-State-Zip:	ORLANDO FL 32835

Title	DIRECTOR
Name	DRYDEN, GREG
Address	200 E ROBINSON ST SUITE 900
City-State-Zip:	ORLANDO FL 32801

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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: DANIEL TOFFOLI EXECUTIVE DIRECTOR 02/26/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FABER, AUSTIN
Address 1000 LEGION PLACE
SUITE 750
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name SMITH, BRIAN
Address 215 N EOLA DRIVE
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR, TREASURER
Name BARFIELD, MELOE
Address 4830 W KENNEDY BLVD
SUITE 500
City-State-Zip: TAMPA FL 33609

Title CHAIRMAN
Name LARUE, DAVE
Address 401 N ORLANDO AVE
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name BAKER, ARTHUR
Address 701 S HOWARD AVE
SUITE 106410
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name RUSSELL, CRAIG
Address 2100 SUMMERFIELD RD
City-State-Zip: WINTER PARK FL 32792

Title DIRECTOR
Name WILLIAMS, RODNEY
Address 595 N PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR, SECRETATY
Name MARTIN, GENE
Address 1 EAST MAIN STREET
City-State-Zip: APOPKA FL 32703

Title COO
Name TOFFOLI, DANIEL
Address 3179 OPEN MEADOW LOOP
City-State-Zip: OVIEDO FL 32766

Title DIRECTOR, VC
Name PENNYPACKER, JEN
Address 777 BENNETT DRIVE
City-State-Zip: LONGWOOD FL 32750

Title DIRECTOR
Name MERCHANT, IAN
Address 1000 UNIVERSAL STUDIOS PLAZA
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR
Name SAPP, JAMIKO
Address P.O. BOX 585
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name BIGELOW, JONATHAN
Address 595 N PRIMROSE DR
City-State-Zip: ORLANDO FL 32803