

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701668

FILED
Jan 05, 2005
Secretary of State

Entity Name: ORLANDO AREA ADVERTISING FEDERATION, INC.

Current Principal Place of Business:

P.O. BOX 1614
ORLANDO, FL 32802

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1614
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 59-1623474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTLEY, BARBARA
1732 MIZELL AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: PETLEOV, ANA
Address: 4000 CENTRAL FLORIDA BLVD
City-St-Zip: ORLANDO, FL 32816

Title: T () Delete
Name: LARSON, DAVE
Address: 220 EAST CENTRAL PARKWAY #1010
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: P () Delete
Name: HARTLEY, BARABRA
Address: 1732 MIZELL AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: S () Delete
Name: BOWMAN, NIKI
Address: 600 E. WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVE LARSON

T

01/05/2005

Electronic Signature of Signing Officer or Director

Date