

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 23, 2006 8:00 am
Secretary of State

05-04-2006 90221 034 ****61.25

DOCUMENT # 702871 1. Entity Name JUNIOR ACHIEVEMENT OF CENTRAL FLORIDA, INC.					
Principal Place of Business 2121 CAMDEN RD. ORLANDO FL 32803			Mailing Address 2121 CAMDEN RD. ORLANDO FL 32803		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 59-0972112				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent XXXXXXXXXXXX 2121 CAMDEN RD ORLANDO FL 32803 GARY R. BLANCHETTE				7. Name and Address of New Registered Agent Name GARY R. BLANCHETTE Street Address (P.O. Box Number is Not Acceptable) 2121 Camden Road City Orlando FL Zip Code 32803	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of individual agent and fee certificate DATE 9-25-06 (NOTE: Registered Agent signature required when renewing)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WARD, DENNIS 201 S ORANGE AVENUE, SUITE 200 ORLANDO FL 32801	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S WILSON, WILLIAM B 200 S ORANGE AVENUE, SUITE 2600 ORLANDO FL 32801	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOSSBURG, KELLY P 450 S ORANGE AVENUE, 14TH FLOOR ORLANDO FL 32802	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALLEN, ASHLEY 633 N ORANGE AVENUE ORLANDO FL 32801	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C REINER, RICHARD K 601 E ROLLINS STREET ORLANDO FL 32803	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D INGERSOLL, JAMES R 4037 CONROY PLACE CIRCLE ORLANDO FL 32812	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered					
SIGNATURE: 6/23/06 Date Daytime Phone #					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					