## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## May 18, 2007 8:00 am Secretary of State **DOCUMENT # 702871** Entity Name 05-18-2007 90212 001 \*\*\*122 50 JUNIOR ACHIEVEMENT OF CENTRAL FLORIDA, INC. Principal Place of Business Mailing Address 2121 CAMDEN RD. ORLANDO FL 32803 2121 CAMDEN RD. ORLANDO FL 32803 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State Applied For 4. FEI Number 59-0972112 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BLANCHETTE, GARY R Street Address (P.O. Box Number is Not Acceptable) 2121 CAMDEN ROAD ORLANDO FL 32803 City Zip Code 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 registered agent and title it applicable. (NOTE: Registered Agent signature reduced when reinstailing) DATE 4 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 HILE Delete TITLE Sacretory ■ Addition Change Merinis wa WARD, DENNIS NAMO STREET ADDRESS STREET ADORESS 201 S ORANGE AVENUE, SUITE 200 CITY-ST-7IP ORLANDO FL: 32801 CITY-ST-ZIP Chairman - Elect TITLE Delete THLE Addition William B. Wilson NAME WILSON, WILLIAM B NAMÉ STREET ADDRESS 200 S ORANGE AVENUE, SUITE 2600 STREET ADDRESS CITY-ST-ZIP CLTY - ST - ZIP ORLANDO FL 32801 Chairman Kelly P. Massburg HILL Delete TITLE Change Addition NAME NAME MOSSBURG, KELLY P STREET ADDRESS STREET ADDRESS 450 S ORANGE AVENUE, 14TH FLOOR CITY-ST-ZIP CHY-S1-ZIP ORLANDO FL 32802 askly atter Same IIILE Delete ☐ Change Addition NAME NAME ALLEN, ASHLEY STREET ADDRESS STREET ADDRESS 633 N ORANGE AVENUE CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 ennueleale Part Chairman IIIE ☐ Delete TITLE ☐ Addition Richard K. Ruiner NAME REINER, RICHARD K NAME STREE LADDRESS STREET ADDRESS 601 E ROLLINS STREET CITY-S1-7IP CITY-SI-7IP ORLANDO FL 32803 IIILE TITLE Treasurer Change Addition **⊠** Delete R. Tee Bennett 301 6. Pine St. Ste. 1400 NAME NAME INGERSOLL, JAMES R STREET ADDRESS STREET ADDRESS 4037 CONROY PLACE CIRCLE CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32812 Oslando, 71 32802 12. Horeby 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 eath; 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

**FILED** 

if changed, or on an attachment with an apdress, with all other like empowered SIGNATURE:

G OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED