

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 13, 2012**  
**Secretary of State**

DOCUMENT# 708715

**Entity Name:** FLEET RESERVISTS OF SEMINOLE COUNTY, FLORIDA, INCORPORATED**Current Principal Place of Business:**3040 STATE ROAD 46 WEST  
SANFORD, FL 32771 US**New Principal Place of Business:****Current Mailing Address:**3040 STATE ROAD 46 WEST  
SANFORD, FL 32771 US**New Mailing Address:****FEI Number:** 59-1095520**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ROBERTS, LUCY M  
930 BLUE HERON BLVD  
OSTEEN, FL 32764 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: P  
Name: URBANCHUK, HOWARD W  
Address: 265 SNOW BIRD CIRCLE  
City-St-Zip: SANFORD, FL 32771

Title: VP  
Name: JOHNSON, WILLIAM D  
Address: 305 MILLER ROAD APT B  
City-St-Zip: DELAND, FL 32724

Title: S  
Name: ROBERTS, LUCY M  
Address: 930 BLUE HERON BLVD  
City-St-Zip: OSTEEN, FL 32764

Title: T  
Name: URBANCHUK, MARY I  
Address: 265 SNOW BIRD CIRCLE  
City-St-Zip: SANFORD, FL 32771

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: LUCY M. ROBERTS

SECR

09/13/2012

Electronic Signature of Signing Officer or Director

Date