

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712026

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Entity Name:** INTERNATIONAL COUNCIL OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

420 S. ORANGE AVE  
SUITE 500  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

420 S. ORANGE AVE  
SUITE 500  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 59-1837575      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHASTANG, LAWRENCE J  
420 S. ORANGE AVE  
SUITE 500  
ORLANDO, FL 32801 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: TURK, ROBERT  
Address: 229 MORNING GLORU DR  
City-St-Zip: LAKE MARY, FL 32746

Title: VP  
Name: FLORES, CYNTHIA  
Address: 200 S. ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

Title: S  
Name: SCHANK, GEORGE  
Address: 30 SKYLINE DR, SUITE 2000  
City-St-Zip: LAKE MARY, FL 32746

Title: T  
Name: CHASTANG, LAWRENCE  
Address: 420 S. ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

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: LAWRENCE J. CHASTANG

T

01/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date