2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# 712663

Entity Name: THE ORANGE COUNTY CLASSROOM TEACHERS ASSOCIATION, INC.

Current Principal Place of Business:

1020 WEBSTER AVENUE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

1020 WEBSTER AVENUE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-0951212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FARRIS, PHILIP
1020 WEBSTER AVE
ORLANDO, FL 32804 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	( ) Delete
Name:	CAHILL, MICHAEL	
Address:	5141 MAJESTIC WOODS PL	
City-St-Zip:	SANFORD, FL 32771	
Title:	V D	( ) Delete
Name:	MOORE, DIANA	
Address:	11298 PAPYRUS LN	
City-St-Zip:	ORLANDO, FL 32821	
Title:	2VPD	( ) Delete
Name:	MORRIS, PATTI	
Address:	4319 OLD DOMINION RD	
City-St-Zip:	ORLANDO, FL 32812	
Title:	T	( ) Delete
Name:	DEMOND, DAVID	
Address:	2445 CRANE CT	
City-St-Zip:	SAINT CLOUD, FL 34771	
Title:	S	( ) Delete
Name:	DENOON, PATRICIA	
Address:	4557 LAKEWAY DR	
City-St-Zip:	ORLANDO, FL 32839	
Title:	D	( ) Delete
Name:	ELTON, WRIGHT	
Address:	2390 ANACOSTIA AVE	
City-St-Zip:	OCOEE, FL 34761	

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:	T	(X) Change ( ) Addition
Name:	DAVIS, SAMUEL	
Address:	3327 JUJUBE DR	
City-St-Zip:	ORLANDO, FL 32810	
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 exemption stated in Chapter 119, 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: PHILIP FARRIS DIR 04/01/2009

Electronic Signature of Signing Officer or Director — Date