10f2

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

ANNUAL REPORT (AR)									FILE	.D	•		
DOCUMENT # 718399  1. Entity Name								SE DIVIS	FILE CRETARY ION OF CO	OF STAT RPORAT	e Ions		
PARENTS & FRIENDS OF THE RETARDED OF CENTRAL FLORIDA, INC.								04	FEB 11	AM 11: 5	1		
Principal Place of Business Mailing Address													
32853 53-6194 P.O. BOX 53-6194 ORLANDO FL 32803 US				P.O. BOX 53-6194 ORLANDO FL 32853 US			1 <b>180</b> (11) 140	<b>i</b> i    <b>ii   i</b>   ii   ii   ii   ii   i	O IEBI EKEN EKINI <b>O</b> r	DIA 81811 81811 BUBU	440. OL 1001		
2. Principal Place of Business 3				3. Mailing Address								<b>     </b>	
Suite, Apt.		Suite, Apt. #, etc.					MOORE	CR2E037		3////			
City & State	<del></del>		City & State				4. FEI Number	23-736683		No	plied For t Applicable		
Zip Country			Zip	Zip Cou			5. Certificate of Status Desired				S8.75 Additional Fee Required		
	6. Name a	and Address of Current	Registered					7. Name and Ad	dress of New I	Registered A	gent		
PATTERSON, ROBERT C. 2504 RAEFORD ROAD ORLANDO FL 32806					Name Street Add	dress (I	P.O. Box Number is	Not Acceptable	e)				
									FL	Zip Code	<u></u>		
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 litle if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE													
FILE NOW: FEE IS \$61.25  Due By May 1, 2004  9. Election Campaign Financing Trust Fund Contribution.							]	\$5.00 May Be Added to Fees		ake Check da Depart			
10.		OFFICERS AND DI	RECTORS		11.			ADDITIONS/CHAN	GES TO OFFICE	RS AND DIF	RECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	t .	IAM, CHARLENE AY POINT CIRCLE FL 32828		☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PATTERSOI 2504 RAEF ORLANDO			Delete							☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	2526 DONE OCOEE FL		- ,	☐ Oelete		· 1-		02.	<u> </u>	5931 1082-014	Change bl.25	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EAMONT, F 2021 MOHI MAITLAND	CAN TR		□ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SUMMERFII	ELIZABETH 6TH CIRCLE ELD FL 34491		☐ Delete		1					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ORLANDO	ADE OAKS DR FL 32822		□ Delete	CITY	EET ADDRESS -ST-ZIP					☐ Change	Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Holest D. Vatters on Feb 9, 2004 407-896-2008 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date Dayline Prone #													

## Parents & Friends of the Retarded of Central Florida, Inc. P.O. Box 6194 Orlando, Florida 32853

## Year 2004 Board of Directors

Lillian Richards 7966 Swordfisk Lane Orlando, Fl. 32822

Joyce Decristoforo 6330 Nightwind Circle Orlando Fl. 32818

Kevin Cole 719 Park Lake Circle Orlando Fl. 32803

Norma Loftis 6030 Gamble Drive Orlando, Fl. 32808

Laverne Syring 8212 Cascade Oaks Drive Orlando, Fl. 32822 Joseph Lofano 13904 S.E. 86th. Circle Summerfield Fl. 34491

Nelson Betancourt 5360 E. Kaley Street Orlando Fl. 32812

Anthoney Frattaroli 1577 Starfish Street Kissimmee, Fl. 34744

Joanne Patterson 2504 Raeford Road Orlando, Fl. 32806