

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726280

FILED
Apr 24, 2009
Secretary of State

Entity Name: SOROSIS OF ORLANDO, INC.

Current Principal Place of Business:

501 E LIVINGSTON ST
ORLANDO, FL 328035616

New Principal Place of Business:

Current Mailing Address:

501 E LIVINGSTON ST
ORLANDO, FL 328035616

New Mailing Address:

FEI Number: 59-0540538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARCO, SUSAN M
505 WARRENTON ROAD
WINTER PARK, FL 32792 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: D () Delete
Name: PINER, SUSAN
Address: 3544 GREENFIELD AVE
City-St-Zip: ORLANDO, FL 32808

Title: VD () Delete
Name: DONLEY, MARY G
Address: 2304 LAUDERDALE COURT
City-St-Zip: ORLANDO, FL 32805

Title: SD () Delete
Name: PANZITTA, JUDITH
Address: 1720 PALM AVE
City-St-Zip: WINTER PARK, FL 32789

Title: TD () Delete
Name: ERD, LINDA G
Address: 2015 SUMMERFIELD ROAD
City-St-Zip: WINTER PARK, FL 32792

Title: VD () Delete
Name: KREPS, PEGGY
Address: 2537 VINE ST
City-St-Zip: ORLANDO, FL 32806

Title: PD () Delete
Name: MAXWELL, MURIEL
Address: 3226 CLEMWOOD DRIVE
City-St-Zip: ORLANDO, FL 32803

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: SUAREZ, WINIFRED
Address: 1511 LANDO LANE
City-St-Zip: ORLANDO, FL 32806

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: LINDA G. ERD

TREA

04/24/2009

Electronic Signature of Signing Officer or Director

Date