

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727532

FILED
Jan 14, 2009
Secretary of State

Entity Name: AMERICAN CULINARY FEDERATION CENTRAL FLORIDA CHAPTER, INC.

Current Principal Place of Business:

285 EAST LAKESHORE BLVD
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

285 EAST LAKESHORE BLVD
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 59-1704893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWELL, ROGER
285 E. LAKESHORE BLVD
KISSIMMEE, FL 34744 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: PD () Delete
Name: NEWELL, ROGER
Address: 285 EAST LAKESHORE BLVD
City-St-Zip: KISSIMMEE, FL 34744

Title: DV () Delete
Name: HARRIS, G.MICHAEL
Address: 400 WILSON PLACE DR.
City-St-Zip: SANFORD, FL 32771

Title: TD () Delete
Name: BURNS, MARGARET
Address: 1942 WILLOW WOOD DRIVE
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: GALDIANO, NORA
Address: 3224 DANTE DR. UNIT 104
City-St-Zip: ORLANDO, FL 32825

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: ROGER NEWELL

PD

01/14/2009

Electronic Signature of Signing Officer or Director

Date