2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Nov 08, 2007 **DOCUMENT# 732258** Secretary of State

Entity Name: BIG BROTHERS BIG SISTERS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 807 S. ORLANDO AVENUE SUITE L WINTER PARK, FL 32789 US **New Mailing Address: Current Mailing Address:** 807 S. ORLANDO AVENUE SUITE L WINTER PARK, FL 32789 US FEI Number: 59-6555007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DISLA, JENNIFER K CEO RIDER, JENNIFER K CEO 1243 COSTAL CREEK CT. 1243 COSTAL CREEK CT. ORLANDO, FL 32828 ORLANDO, FL 32828 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: JENNIFER RIDER 11/08/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PARE, JOHN Name: Name: 2020 ANDERSON PLACE Address: Address: City-St-Zip: ORLANDO, FL 32803 US City-St-Zip: Title: () Delete Title: () Change () Addition FRISCH, CAROL Name: Name: Address: 2266 PARK MAITLAND CT. Address: City-St-Zip: MAITLAND, FL 32751 US City-St-Zip: Title: () Delete Title: () Change () Addition GRAMLING, HEATHER Name: Name: 1933 STONE ABBEY BLVD. Address: Address: City-St-Zip: ORLANDO, FL 32828 US City-St-Zip: Title: **IMPD** () Delete Title: () Change () Addition Name: KUENZLI, JEFF Name: Address: 3017 ELBIB DR. Address: City-St-Zip: ST. CLOUD, FL 34772 US City-St-Zip: Title: VPD () Delete Title: () Change () Addition CARLINE, KELLY Name: Name: 845 N. LAKE CLAIRE CIRCLE Address: Address: City-St-Zip: OVIEDO, FL 32765 US City-St-Zip: Title: () Delete Title: (X) Change () Addition DISLA, JENNIFER K CEO WALLACE, ERIN Name: Name: Address: 1243 COSTAL CREEK CT. Address: 2830 ALSACE CT ORLANDO, FL 32828 US ORLANDO, FL 32812 US City-St-Zip: 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: JENNIFER RIDER CEO 11/08/2007