

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732404

FILED
Apr 30, 2009
Secretary of State

Entity Name: COMMITTEE OF ONE HUNDRED OF ORANGE COUNTY, INC.

Current Principal Place of Business:

1201 S. ORLANDO AVENUE
SUITE 100
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

1201 S. ORLANDO AVENUE
SUITE 100
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-6143022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, KENNETH D
230 VARSITY CIRCLE
ALTAMONTE SPRINGS, FL 32714 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/D () Delete
Name: ROBINSON, KENNETH D
Address: 230 VARSITY CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V/D () Delete
Name: HINSON, J. A
Address: 60 W. ROBINSON ST
City-St-Zip: ORLANDO, FL 32801

Title: T/D () Delete
Name: DEMRO, PHILIP A
Address: 1404 E ROBINSON ST
City-St-Zip: ORLANDO, FL 32801

Title: S/D () Delete
Name: BURNETT, HARVEY
Address: 60 W ROBINSON ST
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: MCLEOD, DAVID
Address: 2250 N. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: COLADO, GUY D
Address: 1201 S. ORLANDO AVENUE, SUITE 100
City-St-Zip: WINTER PARK, FL 32789

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
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Address:
City-St-Zip:

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 A DEMRO

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date