## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 732665** 

FILED Feb 16, 2011 Secretary of State

Entity Name: FLORIDA SENIOR PROGRAMS, INC.

Current Principal Place of Business: New Principal Place of Business:

3545 LAKE BREEZE DRIVE ORLANDO, FL 32808 US

Current Mailing Address: New Mailing Address:

3545 LAKE BREEZE DRIVE ORLANDO, FL 32808 US

FEI Number: 59-1626348 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:

THOMPSON, LONNIE

1652 CIMARRON HILLS DRIVE

APOPKA, FL 32803 US

THOMPSON, LONNIE

1218 CARVELL DRIVE

WINTER PARK, FL 32792 US

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: 02/16/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: STD

Name: RASHY, MORRIS Address: 508 RIVIERA DRIVE

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VPD

Name: BRIDGER, ROB
Address: 7000 LAKE ELLENOR DR
City-St-Zip: ORLANDO, FL 32809

Title: PD

Name: THOMPSON, LONNIE
Address: 1218 CARVELL DRIVE
City-St-Zip: WINTER PARK, FL 32792

Title:

Name: VALERIE, ODOM
Address: 2462 GRAND POPLAR
City-St-Zip: OCOEE, FL 34761

Title:

 Name:
 GELLER, PAULETTE

 Address:
 545 BROOKSIDE CIR

 City-St-Zip:
 MAITLAND, FL 32751

Title: [

 Name:
 GIRLEY, JERRY

 Address:
 125 E. MARKS STREET

 City-St-Zip:
 ORLANDO, FL 32803

I hereby 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 all other like empowered.

SIGNATURE: LONNIE THOMPSON PD 02/16/2011