## 2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jun 19, 2012 Secretary of State **DOCUMENT# 732665** 

Entity Name: FLORIDA SENIOR PROGRAMS, INC.

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

3545 LAKE BREEZE DRIVE ORLANDO, FL 32808

**Current Mailing Address: New Mailing Address:** 

3545 LAKE BREEZE DRIVE ORLANDO, FL 32808

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 BRIDGER, ROB 1218 CARVELL DRIVE 407 MAIN TRAIL

WINTER PARK, FL 32792 US ORMOND BEACH, FL 32174 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: ROB BRIDGER 06/19/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

BRIDGER, ROB Name: Address: 407 MAIN TRAIL

City-St-Zip: ORMOND BEACH, FL 32174 US

Title: STD

Name: HORSLEY, ROGER K Address: 1679 VICTORIA WAY

City-St-Zip: WINTER GARDEN, FL 34787 US

Title:

ELLIS, MARIA Name:

12307 W. COLONIAL DR., STE. 102 Address: City-St-Zip: WINTER GARDEN, FL 34787 US

Title:

Name: MERRIAM, SHERI Address: 1102 MONTCALM ST. City-St-Zip: ORLANDO, FL 32806 US

Title:

GELLER, PAULETTE Name: 545 BROOKSIDE CIR Address: MAITLAND, FL 32751 US City-St-Zip:

Title:

CORSI, NINA Name:

Address: 495 N. KELLER RD., STE. 200 MAITLAND, FL 32751 US City-St-Zip:

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: ROB BRIDGER PD 06/19/2012