

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736895

FILED
Mar 23, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA VANS, INC.

Current Principal Place of Business:

2137 N HAMPTON CIR
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

2137 N HAMPTON CIR
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-1800378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CUNNINGHAM, JOHN M
2137 NORTH HAMPTON CIRCLE
WINTER PARK, FL 32792 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: SD () Delete
Name: OLIVER, LOUISE
Address: 304 N. THOMPSON ROAD
City-St-Zip: APOPKA, FL

Title: D () Delete
Name: CUNNINGHAM, JOHN M
Address: 2137 N HAMPTON CIR
City-St-Zip: WINTER PARK, FL 32792

Title: PD () Delete
Name: PILON, JUDITH
Address: 817 WILDABON AVE.
City-St-Zip: LAKE WALES, FL 33853

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:

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: JOHN M. CUNNINGHAM

D

03/23/2009

Electronic Signature of Signing Officer or Director

Date