2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2011
Secretary of State

DOCUMENT# 764675

Entity Name: BOMA ORLANDO, INC.

Current Principal Place of Business:

4108 BOUNCE DRIVE
ORLANDO, FL 32812 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 568156
ORLANDO, FL 32856

New Mailing Address:

FEI Number: 59-2232454 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETERS, ALLYSON E
4108 BOUNCE DRIVE
ORLANDO, FL 32812 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
Name: SMITH, LUCI PRESIDE
Address: 2966 COMMERCE PARK DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: PE
Name: WALTHER, TERRI PRES EL
Address: 111 NORTH ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801 US

Title: VP
Name: YISRAEL, YAHRAH VICE PR
Address: 20 NORTH ORANGE
City-St-Zip: ORLANDO, FL 32801

Title: T
Name: LYNN, HARIS TREASUR
Address: 410 CELEBRATION PLACE, SUITE 101
City-St-Zip: CELEBRATION, FL 34747 US

Title: S
Name: LINDA, WOLTERS SECRETA
Address: 1321 EDGEWATER DRIVE, #2
City-St-Zip: ORLANDO, FL 32804 US

Title: DIR
Name: PETERS, ALLYSON E BAE, DI
Address: 4108 BOUNCE DRIVE
City-St-Zip: ORLANDO, FL 32812 US

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: ALLYSON PETERS BAE 01/03/2011

Electronic Signature of Signing Officer or Director Date