

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000003217

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Entity Name:** ORGANIZATIONAL STRATEGIES, INC.

**Current Principal Place of Business:**

27488 ARBOR STRAND DR.  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

**Current Mailing Address:**

27488 ARBOR STRAND DR.  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

**FEI Number:** 43-1472646

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DELUCA-FORD, JUDY L PRES  
27488 ARBOR STRAND DR.  
BONITA SPRINGS, FL 34134 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:** PCDT  
**Name:** DELUCA-FORD, JUDY L  
**Address:** 27488 ARBOR STRAND DR.  
**City-St-Zip:** BONITA SPRINGS, FL

**Title:** VSD  
**Name:** FORD, RAY  
**Address:** 27488 ARBOR STRAND DR.  
**City-St-Zip:** BONITA SPRINGS, FL

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JUDY DELUCA-FORD

PRES

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date