

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004974

FILED  
Jan 09, 2012  
Secretary of State

Entity Name: BELZ PARTNERS ORLANDO, INC.

**Current Principal Place of Business:**

100 PEABODY PL., STE. 1400  
MEMPHIS, TN 38103

**New Principal Place of Business:**

**Current Mailing Address:**

100 PEABODY PL., STE. 1400  
MEMPHIS, TN 38103

**New Mailing Address:**

FEI Number: 62-1732231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CD  
Name: BELZ, JACK A  
Address: 100 PEABODY PL., STE. 1400  
City-St-Zip: MEMPHIS, TN 38103

Title: DP  
Name: BELZ, MARTIN S  
Address: 100 PEABODY PL., STE. 1400  
City-St-Zip: MEMPHIS, TN 38103

Title: DP  
Name: BELZ, RONALD A  
Address: 100 PEABODY PL., STE. 1400  
City-St-Zip: MEMPHIS, TN 38103

Title: VD  
Name: GROVEMAN, ANDREW J  
Address: 100 PEABODY PL., STE. 1400  
City-St-Zip: MEMPHIS, TN 38103

Title: DV  
Name: WILLIAMS, JIMMIE D  
Address: 100 PEABODY PL., STE. 1400  
City-St-Zip: MEMPHIS, TN 38103

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: JIMMIE D WILLIAMS

DV

01/09/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date