## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N0000000112

Entity Name: ARMA OF ORLANDO, INC.

Apr 22, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** PO BOX 621706 ORLANDO, FL 328621706 **Current Mailing Address: New Mailing Address:** PO BOX 621706 ORLANDO, FL 328621706 **FEI Number:** FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: YOUNG, ALICE B JOLINSKI, JENNY 7464 DIRÉCTOR'S ROW GREATER ORLANDO AVIATION AUTHORITY ONE AIRPORT BOULEVARD ORLANDO, FL 32809 ORLANDO, FL 32827 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: JENNY JOLINSKI 04/22/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition AMES, JOHN Name: Name: 425 NORTH ORANGE AVENUE ROOM 150 Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition CD Name: YOUNG, ALICE B Name: YOUNG, ALICE B Address: ONE AIRPORT BOULEVARD Address: ONE AIRPORT BOULEVARD City-St-Zip: ORLANDO, FL 32827 City-St-Zip: ORLANDO, FL 32827 Title: DP () Delete Title: () Change () Addition JOLINSKI, JENNY Name: Name: 7464 DIRECTOR'S ROW Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: MAROTH, CHARLOTTE Address: Address: 445 WEST AMELIA ST City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: ( ) Change (X) Addition BAIN, BRIAN Name: Name: 445 WEST AMELIA ST Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: ( ) Change (X) Addition FERNANDEZ, EDUARDO Name: Name: Address: Address: PO BOX 10170 LAKE BUENA VISTA, FL 32830 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLOTTE MAROTH T 04/22/2002