

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000112

FILED
Jun 19, 2008
Secretary of State

Entity Name: ARMA OF ORLANDO, INC.

Current Principal Place of Business:

6501 MAGIC WAY
BLDG 500 - RECORDS
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

PMB 319
424 EAST CENTRAL BLVD
ORLANDO, FL 32801

New Mailing Address:

PMB 321
424 EAST CENTRAL BLVD
ORLANDO, FL 32801

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MAROTH, CHARLOTTE
6501 MAGIC WAY
BLDG 500 - RECORDS
ORLANDO, FL 32809 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 () Delete
Name: O'TOOLE, TIM
Address: 1900 HOTEL PLAZA BLVD
City-St-Zip: LAKE BUENA VISTA, FL 32830

Title: V () Delete
Name: JOLINSKI, JENNY
Address: 7464 DIRECTOR'S ROW
City-St-Zip: ORLAND, FL 32809

Title: V () Delete
Name: FLOMERFELT, HAL
Address: 1800 CYPRESS LAKE DRIVE, SUITE 200
City-St-Zip: ORLANDO, FL 32802

Title: T () Delete
Name: MAROTH, CHARLOTTE
Address: 6501 MAGIC WAY, BUILDING 500
City-St-Zip: ORLANDO, FL 32809

Title: S () Delete
Name: SKIDMORE, PEGGY
Address: G.O.A.A. ONE AIRPORT BLVD
City-St-Zip: ORLANDO, FL 32827

Title: D () Delete
Name: HUSTON, SHARON
Address: 450 EAST SOUTH STREET, 2ND FLOOR
City-St-Zip: ORLANDO, FL 32801

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MCELROY, VICKI
Address: 4974 ORL TOWER ROAD
City-St-Zip: ORLANDO, FL 328807

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: CHARLOTTE MAROTH

T

06/19/2008

Electronic Signature of Signing Officer or Director

Date