2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000975

Apr 29, 2009 Secretary of State

FILED

Entity Name: THE MATRIX OF GREATER ORLANDO, INC.

Current Principal Place of Business: New Principal Place of Business: 1736 BARCELONA WAY 982 STONEWOOD LANE WINTER PARK, FL 32789 MAITLAND, FL 32751 **Current Mailing Address: New Mailing Address:** 1736 BARCELONA WAY 982 STONEWOOD LANE WINTER PARK, FL 32789 MAITLAND, FL 32751 FEI Number: 59-3617621 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRIFFIN, MICKEY COHEN, ELIZABETH 1736 BARCELONA WAY 982 STONEWOOD LANE WINTER PARK, FL 32789 US MAITLAND, FL 32751 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: ELIZABETH COHEN 04/29/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BLACK, ELIZABETH T Name: Name: 1613 ORANGEWOOD AVE. Address: Address: ORLANDO, FL 32806 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition COHEN, ELIZABETH Name: Name: Address: 982 STONEWOOD LANE Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: (X) Change () Addition GRIFFIN, MICKEY B Name: GRIFFIN, MICKEY B Name: 1763 BARCELONA WAY Address: Address: 150 ALMA STREET, #312 City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: MENLO PARK, CA 94025 Title: () Delete Title: () Change () Addition Name: RAFFA, JEAN Name: 45 EASTWIND LANE Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: () Change () Addition SHEEHY, LOUISE F Name: Name: 612 WOODRIDGE Address: Address: City-St-Zip: FERN PARK, FL 32730 City-St-Zip: Title: () Delete Title: () Change () Addition TATUM, EILEEN Name: Name: Address: 2346 SIERRA LANE Address: MAITLAND, FL 32751 City-St-Zip: 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: ELIZABETH COHEN SEC 04/29/2009