

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 28, 2002 8:00 am**  
**Secretary of State**

04-28-2002 90576 040 \*\*\*\*61.25

DOCUMENT # N0000006255

1. Entity Name

ORANGE COUNTY EDUCATIONAL SOCIAL WORKER'S  
ASSOCIATION, INC.

**DO NOT WRITE IN THIS SPACE**

636369

2. Principal Place of Business

2723 Grantham Court  
Suite, Apt. #, etc.

3. Mailing Address

P. O. Box 1487  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Orlando, Florida

City & State

Windermere, Florida

4. FEI Number

5933685330

Applied For

Not Applicable

Zip

32835

Country

Orange

Zip

34786-1487

Country

U.S.

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Victor M. Garcia

Street Address (P.O. Box Number is Not Acceptable)

10849 Norcross Circle

City

Orlando

FL

Zip Code  
32825

**DO NOT WRITE  
IN THIS SPACE**

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

*Victor M. Garcia*

Victor M. Garcia, Chairman

April 10, 2002

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	C/D Victor M. Garcia 10849 Norcross Cr. Orlando, Fl. 32825	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VC/D Susan Moncrief 472 W. Par St. Orlando, Fl. 32804	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/D Gwen Pendarvis 6807 Windstream Terrace Orlando, Fl. 32818	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treas: Jan Eberl 806 E. Anderson St. Orlando, Fl. 32801	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Trust: Cathy Williams 12726 Windermere Isles Place Windermere, Fl. 34786	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Victor M. Garcia*

Victor M. Garcia 4-10-02 (407) 737-1490 ext. 261