

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000007078

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA OSTEOPATHIC FOUNDATION, INC.

**Current Principal Place of Business:**

7326 LAKE UNDERHILL RD  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

7326 LAKE UNDERHILL RD  
ORLANDO, FL 32822

**New Mailing Address:**

**FEI Number:** 59-3677500

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUSI, RICHARD J DO  
7326 LAKE UNDERHILL RD  
ORLANDO, FL 32822 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:** D  
**Name:** SUSI, RICHARD J  
**Address:** 7326 LAKE UNDERHILL RD.  
**City-St-Zip:** ORLANDO, FL 32822

**Title:** D  
**Name:** MOORE, KEITH S  
**Address:** 7824 LAKE UNDERHILL STE A  
**City-St-Zip:** ORLANDO, FL 32822

**Title:** D  
**Name:** RALEY, JANE-MARIE S  
**Address:** 10055 UNIVERSITY BLVD  
**City-St-Zip:** ORLANDO, FL 32817

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** J RICHARD SUSI

D

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date