

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 13, 2007
Secretary of State

DOCUMENT# N00165

Entity Name: MILITARY OFFICERS ASSOCIATION OF AMERICA, CENTRAL FLORIDA CHAPTER, INC.**Current Principal Place of Business:**DEF. FIN SUC
RM 125 2500 LEAMY ST.
ORLANDO, FL 32803 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 141025
ORLANDO, FL 32814 US**New Mailing Address:****FEI Number:** 59-2395173**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LEPAGE, ROBERT M
5132 SAILWIND CIR
ORLANDO, FL 32810 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: LEPAGE, ROBERT M
Address: 5132 SAILWIND CIR
City-St-Zip: ORLANDO, FL 32810**Title:** V () Delete
Name: JOHNSON, SYLVESTER
Address: 657 STONEFIELD LOOP
City-St-Zip: HEATHROW, FL 32746**Title:** T () Delete
Name: HINES, JOSEPH V
Address: 554 ABINGTON CT
City-St-Zip: APOPKA, FL 32703**Title:** D () Delete
Name: HOY, ROBERT
Address: 272 VIA TUSCANY LOOP
City-St-Zip: LAKE MARY, FL 32746**Title:** D () Delete
Name: KLINGBERG, FRANCES
Address: 2448 LAKE WAVE DR
City-St-Zip: WINTER PARK, FL 32789**Title:** D () Delete
Name: BUERGER, ROBERT P
Address: 26 MINNEHAHA CIR
City-St-Zip: MAITLAND, FL 32751**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:** V (X) Change () Addition
Name: GATES, WILLIAM J
Address: 114 BERKSHIER CIR. E
City-St-Zip: LONGWOOD, FL 32779**Title:** T (X) Change () Addition
Name: SIMON, JAMES M
Address: 4589 HERITAGE OAK DR
City-St-Zip: ORLANDO, FL 32808**Title:** S (X) Change () Addition
Name: GREEN, PATRICIA A
Address: 139 VARIETY TREE CIR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: JOSEPH V. HINES

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08/13/2007

Electronic Signature of Signing Officer or Director

Date