

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005539

FILED
Apr 03, 2009
Secretary of State

Entity Name: OSLO TRADE CENTER ASSOCIATION, INC.

Current Principal Place of Business:

921 18TH AVENUE SW
VERO BEACH, FL 32962 US

New Principal Place of Business:

977 18TH AVENUE SOUTH WEST
VERO BEACH, FL 32962 US

Current Mailing Address:

921 18TH AVENUE SW
VERO BEACH, FL 32962 US

New Mailing Address:

5380 EIGHTH ST.
VERO BEACH, FL 32968 US

FEI Number: 04-3689327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORCORAN, WILLIAM
921 18TH AVENUE SW
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

JENKINS, CHARLES
104 RIVER OAK DRIVE
VERO BEACH, FL 32963 US

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: CHARLES JENKINS

04/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: PROFITT, TERFUND A
Address: 921 18TH AVENUE SW
City-St-Zip: VERO BEACH, FL 32962 US

Title: DP () Delete
Name: CORCORAN, WILLIAM
Address: P. O. BOX 1252
City-St-Zip: VERO BEACH, FL 32961 US

Title: DVP () Delete
Name: SIMOS, NICK
Address: 5380 8TH STREET
City-St-Zip: VERO BEACH, FL 32968

Title: DS () Delete
Name: POFFENBERGER, LINDA
Address: 652 LAKE ORCHID CIRCLE
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: SIMOS, FLORENCE
Address: 5380 EIGHTH ST
City-St-Zip: VERO BEACH, FL 32968 US

Title: DP (X) Change () Addition
Name: JENKINS, CHARLES
Address: 104 RIVER OAK DRIVE
City-St-Zip: VERO BEACH, FL 32963 US

Title: DVP (X) Change () Addition
Name: SIMOS, NICHOLAS
Address: 5380 8TH STREET
City-St-Zip: VERO BEACH, FL 32968

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: FLORENCE SIMOS

DT

04/03/2009

Electronic Signature of Signing Officer or Director

Date