

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007875

FILED
Jan 19, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA OFFICIALS ASSOCIATION, INC.

Current Principal Place of Business:

668 NORTH ORLANDO AVE.
STE 221
MAITLAND, FL 32751

New Principal Place of Business:

668 NORTH ORLANDO AVE.
STE 211
MAITLAND, FL 32751

Current Mailing Address:

668 NORTH ORLANDO AVE.
STE 221
MAITLAND, FL 32751

New Mailing Address:

668 NORTH ORLANDO AVE.
STE 211
MAITLAND, FL 32751

FEI Number: 59-2030517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DON, THOMAS
668 NORTH ORLANDO AVE.
STE 221
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

DON, THOMAS
668 NORTH ORLANDO AVE.
STE 211
MAITLAND, FL 32751 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:

01/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEEN, JEFF
Address: 1442 TOWHEE RUN
City-St-Zip: OVIEDO, FL 32765

Title: T () Delete
Name: VANATTA, GREGORY
Address: 305 MCCLINTOCK STREET
City-St-Zip: LONGWOOD, FL 32750

Title: V () Delete
Name: GOODSPEED, MIKE
Address: 921 CARRIBEAN PLACE
City-St-Zip: CASSELBERRY, FL 32707

Title: SD () Delete
Name: TAYLOR, L. ROLAND
Address: 1107 EVANGELINE AVENUE
City-St-Zip: ORLANDO, FL 32809

Title: V () Delete
Name: FESSLER, KIM
Address: 3389 S. ST. LUCIE DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: V () Delete
Name: CANNADY, HORACE
Address: 6731 MERLIN COURT
City-St-Zip: ORLANDO, FL 32810

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: SD (X) Change () Addition
Name: TAYLOR, L. ROLAND
Address: 1107 EVANGELINE AVENUE
City-St-Zip: ORLANDO, FL 32809

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GREGORY VANATTA

MR.

01/19/2009

Electronic Signature of Signing Officer or Director

Date