

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000170

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** HEALTHY FLORIDA FOUNDATION LOBBY, INC.

**Current Principal Place of Business:**

200 S ORANGE AVE SUITE 2300  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

200 S ORANGE AVE SUITE 2300  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 04-3591531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

A.G.C. CO.  
200 S ORANGE AVE SUITE 2300  
ORLANDO, FL 32801 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:** MCCOLLUM, BILL  
**Address:** 200 S ORANGE AVE SUITE 2300  
**City-St-Zip:** ORLANDO, FL 32801

**Title:** D  
**Name:** WILSON, CECIL  
**Address:** 1341 ORANGE AVE  
**City-St-Zip:** WINTER PARK, FL 32789

**Title:** D  
**Name:** PILHORN, RICHARD  
**Address:** 617 E COLONIAL DR  
**City-St-Zip:** ORLANDO, FL 32803

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:** BILL MCCOLLUM

D

03/20/2012

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

\_\_\_\_\_  
Date