

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000396

FILED  
Apr 18, 2007  
Secretary of State

**Entity Name:** TEEN PREGNANCY PREVENTION COALITION OF ORANGE COUNTY INC.

**Current Principal Place of Business:**

726 S. TAMPA AVE.  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

726 S. TAMPA AVE.  
ORLANDO, FL 32805

**New Mailing Address:**

**FEI Number:** 37-1418519

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TEEN PREG. PREV. COAL. OF ORANGE CO. INC.  
726 S. TAMPA AVE.  
ORLANDO, FL 32805 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: CD ( ) Delete  
Name: IDTENSOHN, SUSAN  
Address: 726 S. TAMPA AVE.  
City-St-Zip: ORLANDO, FL 32805 US

Title: D ( ) Delete  
Name: SUTHERLAND, LINDA  
Address: 600 COURTLAND, SUITE 565  
City-St-Zip: ORLANDO, FL 32804 US

Title: T ( ) Delete  
Name: BROWN, DIANE TREASUR  
Address: 832 W. CENTRAL BLVD  
City-St-Zip: ORLANDO, FL 32805 US

Title: SEC ( ) Delete  
Name: RIVERA, IVONNE SECRE  
Address: 4680 LK. UNDERHILL ROAD  
City-St-Zip: ORLANDO, FL 32807 US

Title: M ( ) Delete  
Name: DEY, MICHAEL MANAGER  
Address: 832 W. CENTRAL BLVD. 4TH FLOOR  
City-St-Zip: ORLANDO, FL 32805 US

**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: ( ) 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 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: SUSAN IDTENSOHN

CD

04/18/2007

Electronic Signature of Signing Officer or Director

Date