2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002477

FILED Jan 25, 2011 Secretary of State

Entity Name: ORLANDO PARROT HEADS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

7100 RED LANTERN DRIVE C/O SUZANNE TEMPLIN HARMONY, FL 34773 2489 TRENTWOOD BLVD.

ORLANDO, FL 32812

Current Mailing Address: New Mailing Address:

7100 RED LANTERN DRIVE C/O SUZANNE TEMPLIN HARMONY, FL 34773 2489 TRENTWOOD BLVD. ORLANDO, FL 32812

FEI Number: 01-0669807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SCHOTT, LISA 4521 OLD CARRIAGE TRAIL OVIEDO, FL 32765 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: C

 Name:
 SCHLEGEL, JAMES L

 Address:
 P.O. BOX 520378

 City-St-Zip:
 LONGWOOD, FL 32752

Title: P

Name: SCHOTT, LISA

Address: 4521 OLD CARRIAGE TRAIL

City-St-Zip: OVIEDO, FL 32765

Title: VP

Name: BROULIK, BRUCE
Address: 5205 JADE CIRCLE
City-St-Zip: ORLANDO, FL 32812

Title:

Name: TEMPLIN, SUZANNE
Address: 2489 TRENTWOOD BLVD.
City-St-Zip: ORLANDO, FL 32812

Title: S

Name: RAMSTECK, LAURIE Address: 320 LONGSHADOW CT. City-St-Zip: OCOEE, FL 34761

Title:

Name: ESSER, TAMMY
Address: 2202 BANBURY AVE
City-St-Zip: DELTONA, FL 32725

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: SUZANNE W. TEMPLIN T 01/25/2011