

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002477

FILED
Jan 11, 2012
Secretary of State

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

Current Principal Place of Business:

C/O SUZANNE TEMPLIN
2489 TRENTWOOD BLVD.
ORLANDO, FL 32812

New Principal Place of Business:

Current Mailing Address:

C/O SUZANNE TEMPLIN
2489 TRENTWOOD BLVD.
ORLANDO, FL 32812

New Mailing Address:

FEI Number: 01-0669807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHOTT, LISA
4521 OLD CARRIAGE TRAIL
OVIEDO, FL 32765 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: 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: T
Name: TEMPLIN, SUZANNE
Address: 2489 TRENTWOOD BLVD.
City-St-Zip: ORLANDO, FL 32812

Title: S
Name: DORSEY, JACKIE
Address: 556 N. LAKE AVE.
City-St-Zip: APOPKA, FL 32712

Title: D
Name: BUCHANAN, AMY
Address: 26024 PINE VALLEY DRIVE
City-St-Zip: SORRENTO, FL 32776

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

01/11/2012

Electronic Signature of Signing Officer or Director

Date