

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005907

FILED
Mar 31, 2004
Secretary of State**Entity Name:** ORLANDO FIRE TRUST, INC.**Current Principal Place of Business:**400 SOUTH ORANGE AVE. 7TH FLOOR
ORANGE, FL 32801**New Principal Place of Business:****Current Mailing Address:**400 SOUTH ORANGE AVE. 7TH FLOOR
ORANGE, FL 32801**New Mailing Address:****FEI Number:** 01-0746149**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FLORES, MARGARITA R
400 SOUTH ORANGE AVE
ORANGE, 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 () Delete
Name: WALKER, JR., CHARLIE B
Address: 2938 GRANDOLA DR
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: PEARCE, ROBERT
Address: 3345 CARLA ST
City-St-Zip: ORLANDO, FL 32806

Title: D () Delete
Name: LOOKHOFF, PAZ A
Address: 232 SAWYERWOOD PL
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: FLORES, MARGARITA R
Address: 735 ALABAMA WOODS LANE
City-St-Zip: ORLANDO, FL 32824

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARGARITA R FLORES

D

03/31/2004

Electronic Signature of Signing Officer or Director

Date