

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007496

FILED
Sep 02, 2008
Secretary of State

Entity Name: DELTA EDUCATION AND LIFE TRAINING ALLIANCE FOUNDATION OF ORLANDO, FL, INC.

Current Principal Place of Business:

7062 COUPERIN BLVD
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

7062 COUPERIN BLVD
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 16-1643524 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: P () Delete
Name: ADAMS KNIGHT, LOLA
Address: 7062 COUPERIN BLVD
City-St-Zip: ORLANDO, FL 32818

Title: VP () Delete
Name: SCOTT LUE, MARTHA
Address: 1337 TALL MAPLE LOOP
City-St-Zip: OVIEDO, FL 32765

Title: S () Delete
Name: MOODY, GLORIA
Address: 1142 CORETTA WAY
City-St-Zip: ORLANDO, FL 32805

Title: T () Delete
Name: COOPER, ROSE
Address: 4922 SANOMA VILLAGE
City-St-Zip: ORLANDO, FL 32808

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 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: ROSE COOPER

T

09/02/2008

Electronic Signature of Signing Officer or Director

Date