2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000006989

1. Entity Name
ALTRUSA INTERNATIONAL, INC., OF ORLANDO-WINTER PARK



STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7/P

CTTY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

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NAME STREET ADDRESS

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MALIE

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316 Hinsdale Drive

DeBary, FL 32713

Patricia Tobin

2105 Anderson Place

Orlando, FL 32803

Mar 01, 2007 8:00 am Secretary of State

03-01-2007 90006 041 ****61.25

RESULTANT -

FILED

Principal Place of Business P.O.BOX 2972 WINTER PARK, FL 32790

TD

n

211 BEMBOO DRIVE

SANFORD, FL 32773

3034 CRYSTAL OAK CT

ORLANDO, FL. 32806

2467 MIDDLETON AVE

WINTER PARK, FL 32792

WRIGHT, LINDA

DEDIK, TONI

NELSON, JUDY

STREET ADDRESS 13308 FAIRWAY POINTE ROAD

ORLANDO, FL 32828

TIRE

NAME

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NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE --

CITY-ST-ZIP

NAME

CITY-ST-ZP

CITY-ST-7/P

Mailing Address P.O.BOX 2972

WINTER PARK, FL 32790

						AT 1881 IN 1811 IN 1881
2. Principal Place of Business - No P.O. Box # 3.		3. Mailing Address	J. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		NP CR2E037 (12/06)
City & State		City & State	City & State			Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status		.75 Additional Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent		
	TON CAROL		Name			
	RTON, CAROL OBINSON ST), FL		Street A	Street Address (P.O. Box Number is Not Acceptable)		
			City		FL	Zip Code
SIGNATURE .	ions of registered agent. Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent eignet	ure required when renstating)	DATE	
• •	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees	Make check pa Florida Departme	
10.	OFFICERS AND DI	RECTORS	11.	ADDITIONS/CHANGES T	O OFFICERS AND DIREC	TORS IN 10
TITLE	PD	☑ Delete	TITLE	Allie Myers	X	Change
NAME	HOPE, ANITA		NAME	3732 Grant Street		
STREET ADDRESS CITY-ST-ZIP	2210 CHIPPEWA TRAIL		STREET ADDRESS CITY-ST-ZIP			
	MAITLAND, FL 32751			Orlando, FL 32812		
TITLE	VD	⊠ Delete	TITLE	Martha Kirby	DX.	Change
name Street adoress	ROE, ALLIE 3732 GRANT ST		namé Street adoréss	5208 Pico Street		
CITY-ST-ZIP	ORLANDO, FL 32812		CITY-ST-ZIP	Orlando, FL 32817		
TITLE NAME	SD CAMPELL JEAN	⊠ Delete	TITLE NAME	Chervl Mallov		Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	Linda M	Zusiaht	dreame
	PROMATICAL AND TO	VOIED OR EMPLEO MAI	OF OF BIGNING OFFICER O

407-422-4310

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