## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005535

FILED Feb 11, 2009 Secretary of State

Entity Name: GREATER ORLANDO ALLIANCE OF BLACK SCHOOL EDUCATORS, INC.

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

445 WEST AMELIA STREET ORLANDO, FL 32801 US

Current Mailing Address: New Mailing Address:

445 WEST AMELIA STREET ORLANDO, FL 32801 US

FEI Number: 83-0398511 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:

VICKI, BROOKS WILLIAMS, MARVIA

445 WEST AMELIA STREET
ORLANDO, FL 32801 US
445 WEST AMELIA STREET
ORLANDO, FL 32801 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: MARVIA WILLIAMS 02/11/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: BROOKS, VICKI Name: WILLIAMS, MARVIA

Address: 445 WEST AMELIA STREET Address: 445 WEST AMELIA STREET

City-St-Zip: ORLANDO, FL 32801 US City-St-Zip: ORLANDO, FL 32801 US

Title: Title: (X) Change ( ) Addition ( ) Delete HANIFF, RUTH Name: MCLEAN-SMITH, BARBARA DR. Name: Address: 1500 AARON AVENUE Address: 2210 S. RIO GRANDE AVE. City-St-Zip: ORLANDO, FL 32811 US City-St-Zip: ORLANDO, FL 32805 US

Title: SEC ( ) Delete Title: S (X) Change ( ) Addition Name: THOMAS, CORA Name: BROWN, RITA

 Address:
 11 S. HIAWASEE RD
 Address:
 11100 GALVIN DR.

 City-St-Zip:
 ORLANDO, FL 32835 US
 City-St-Zip:
 ORLANDO, FL 32821 US

Title: TRE ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 THOMPSON, JEROME E
 Name:
 BELL, RONALD

 Address:
 2220 W. 29TH STREET
 Address:
 11 S. HIAWASSEE RD.

 City-St-Zip:
 ORLANDO, FL 32805 US
 City-St-Zip:
 ORLANDO, FL 32835 US

Title: FOUN ( ) Delete Title: MCP (X) Change ( ) Addition Name: FLORENCE, ALEXANDER Name: DESPENZA-CONNELLY, BRIT

 Address:
 P.O. BOX 915115
 Address:
 1100 E. MAPLE ST.

 City-St-Zip:
 LONGWOOD, FL 32791
 City-St-Zip:
 WINTER GARDEN, FL 34787

Otty of Zip. Villy I. (3770)

 Title:
 FOUN (X) Delete
 Title:
 ( ) Change ( ) Addition

 Name:
 STANLEY, ALEXANDER
 Name:

 Address:
 P,O, BOX 915144
 Address:

 City-St-Zip:
 LONGWOOD, FL 32791
 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: MARVIA WILLIAMS P 02/11/2009