

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007770

FILED
Apr 02, 2007
Secretary of State

Entity Name: ORLANDO REEF CARETAKERS ASSOCIATION, INC.

Current Principal Place of Business:

10921 LEADER LANE
ORLANDO, FL 32825

New Principal Place of Business:

281 ADELAIDE STREET
DEBARY, FL 32713

Current Mailing Address:

10921 LEADER LANE
ORLANDO, FL 32825

New Mailing Address:

281 ADELAIDE STREET
DEBARY, FL 32713

FEI Number: 42-1642051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOOLE, JOANNE
10921 LEADER LANE
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

MCDUGALL, PAMELA J TREAS
1504 LUND AVE
KISSIMMEE, FL 34744 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: PAMELA JO MCDUGALL

04/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TOOLE, JOANNE
Address: 10921 LEADER LANE
City-St-Zip: ORLANDO, FL 32825

Title: V () Delete
Name: DILLARD, LEANNE
Address: 586 CALIBRE CREST PKWT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S () Delete
Name: MC DOUGALL, PAMELA
Address: 1504 LUND AVE
City-St-Zip: KISSIMMEE, FL 34744

Title: T () Delete
Name: CLEMENTS, JON
Address: 123 SUNSET DRIVE
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KANTZ, MATHEW
Address: 281 ADELAIDE ST
City-St-Zip: DEBARY, FL 32713

Title: V (X) Change () Addition
Name: KANTZ, MELISSA
Address: 281 ADELAIDE ST
City-St-Zip: DEBARY, FL 32713

Title: S (X) Change () Addition
Name: KANTZ, MELISSA
Address: 281 ADELAIDE ST
City-St-Zip: DEBARY, FL 32713

Title: T (X) Change () Addition
Name: MCDUGALL, PAMELA J
Address: 1504 LUND AVE
City-St-Zip: KISSIMMEE, FL 34744

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA JO MCDUGALL

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04/02/2007

Electronic Signature of Signing Officer or Director

Date