

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010843

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: NAHREP OF ORLANDO, INC.

## Current Principal Place of Business:

260 E. ALTAMONTE DR.  
ALTAMONTE SPRINGS, FL 32701 US

## New Principal Place of Business:

## Current Mailing Address:

260 E. ALTAMONTE DR.  
ALTAMONTE SPRINGS, FL 32701 US

## New Mailing Address:

FEI Number: 20-1877385

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTIZ, GLORIA I RA  
318 BRIXHAM HARBOR CLOSE  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

ORTIZ, GLORIA I RA  
978 PALM SPRINGS DRIVE  
ALTAMONTE SPRINGS, FL 32701 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: GLORIA I ORTIZ

04/26/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ZAGONY, CAROLYN  
Address: 3713 S. LAKE ORLANDO PKWY  
City-St-Zip: ORLANDO, FL 32808 US

Title: VP ( ) Delete  
Name: SANTELICES, BRENDA  
Address: 1068 PORTMOOR WAY  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D ( ) Delete  
Name: ORTIZ, GLORIA I  
Address: 318 BRIXHAM HARBOR CLOSE  
City-St-Zip: LONGWOOD, FL 32779

Title: D (X) Delete  
Name: POPPER, DAVID H  
Address: 201 E PINE STREET  
City-St-Zip: ORLANDO, FL 32801 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: POPPER, DAVID H  
Address: 201 D PINE STREET  
City-St-Zip: ORLANDO, FL 32801 US

Title: D (X) Change ( ) Addition  
Name: ORTIZ, GLORIA I  
Address: 978 PALM SPRINGS DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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 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: GLORIA I ORTIZ

D

04/26/2006

Electronic Signature of Signing Officer or Director

Date