

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000559

FILED  
Apr 29, 2010  
Secretary of State

Entity Name: OSCEOLA BUSINESS REFERRAL SERVICE, INC.

**Current Principal Place of Business:**

1134 NEW YORK AVENUE  
ST. CLOUD, FL 347693782 US

**New Principal Place of Business:**

1138 NEW YORK AVENUE  
ST. CLOUD, FL 347693782 US

**Current Mailing Address:**

1134 NEW YORK AVENUE  
ST. CLOUD, FL 347693782 US

**New Mailing Address:**

1138 NEW YORK AVENUE  
ST. CLOUD, FL 347693782 US

FEI Number: 59-3320073

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HEMPHILL, JAMES C  
1134 NEW YORK AVENUE  
ST. CLOUD, FL 347693782 US

**Name and Address of New Registered Agent:**

HEMPHILL, JAMES C  
1138 NEW YORK AVENUE  
ST. CLOUD, FL 347693782 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:

04/29/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: YEAGER, TODD  
Address: 1138 NEW YORK AVENUE  
City-St-Zip: ST. CLOUD, FL 347693782 US

Title: VP  
Name: KOCHER, ROBERT  
Address: 1138 NEW YORK AVE.  
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: TRS  
Name: DOWLING, NORA  
Address: 1138 NEW YORK AVE  
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: S  
Name: DOWLING, NORA  
Address: 1138 NEW YORK AVE  
City-St-Zip: SAINT CLOUD, FL 34769 US

I hereby 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 all other like empowered.

SIGNATURE: TODD YEAGER

P

04/29/2010

Electronic Signature of Signing Officer or Director

Date