

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003959

FILED  
Jun 02, 2009  
Secretary of State

Entity Name: AO INTERNATIONAL FOUNDATION, INC.

## Current Principal Place of Business:

3278 CANDLERIDGE DR  
ORLANDO, FL 32822

## New Principal Place of Business:

## Current Mailing Address:

3278 CANDLERIDGE DR  
ORLANDO, FL 32822

## New Mailing Address:

FEI Number: 52-2454785      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

PAULINO, RICK H  
5033 BERMUDA CIRCLE  
ORLANDO, FL 32808 US

## Name and Address of New Registered Agent:

MISER FINANCIAL SERVICES, LLC  
1855 W SR 434  
SUITE 273  
LONGWOOD, FL 32750 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: PETER ABBATE

06/02/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: MRS ( ) Delete  
Name: ONG, AMI  
Address: 3278 CANDLERIDGE DR  
City-St-Zip: ORLANDO, FL 32812

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MR ( ) Change (X) Addition  
Name: DALIDA, APOLINARIO C DR  
Address: 104 AMBERWOOD CT  
City-St-Zip: LONGWOOD, FL 32779

Title: MRS ( ) Change (X) Addition  
Name: ANTIOQUIA, HAYDEE  
Address: 624 ENTRADA AVE  
City-St-Zip: SEBRING, FL 33875

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: AMI ONG

ED

06/02/2009

Electronic Signature of Signing Officer or Director

Date