

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004118

FILED
Mar 25, 2009
Secretary of State

Entity Name: RETROUVAILLE OF ORLANDO, INC.

Current Principal Place of Business:

800 N FERNCREEK AVE
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

800 N FERNCREEK AVE
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 20-8562569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCE, JOHN G
PIERCE AND ASSOCIATES, P.L.C.
800 NORTH FERNCREEK AVE
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZAMBORSKY, BILL
Address: 2309 HOLDER ROAD
City-St-Zip: MIMS, FL 32754 US

Title: D () Delete
Name: MILMORE, FRANK
Address: 1099 SHAFFER TRAIL
City-St-Zip: OVIEDO, FL 32765 US

Title: D () Delete
Name: KARP, WILLIAM
Address: 620 ANDERSON COURT
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: D () Delete
Name: HOUSEMAN, STEVE
Address: 1433 BROOKSIDE AVENUE
City-St-Zip: KISSIMMEE, FL 33474 US

Title: D () Delete
Name: BROOKFIELD, CURTIS
Address: 6421 WINDER OAKS BLVD.
City-St-Zip: ORLANDO, FL 32819 US

Title: D (X) Delete
Name: CONOD, JOHN
Address: 13227 BISCAYNE DRIVE
City-St-Zip: GRAND ISLAND, FL 32735 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BERDIS, THOMAS
Address: 1029 MOCKINGBIRD CIRCLE
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: D (X) Change () Addition
Name: KARP, WILLIAM
Address: 620 ANDERSON COURT
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: D (X) Change () Addition
Name: HOUSEMAN, STEVE
Address: 1433 BROOKSIDE AVENUE
City-St-Zip: KISSIMMEE, FL 33474 US

Title: D (X) Change () Addition
Name: SPROUSE, BRYAN
Address: 14601 DILBECK DRIVE
City-St-Zip: SPRING HILLS, FL 34610 US

Title: D (X) Change () Addition
Name: GORMAN, PATRICK
Address: 416 RINGWOOD CIRCLE
City-St-Zip: ORLANDO, FL 32708 US

Title: () Change () Addition
Name:
Address:
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: THOMAS BERDIS

D

03/25/2009

Electronic Signature of Signing Officer or Director

Date