

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008637

FILED  
Apr 17, 2008  
Secretary of State

Entity Name: MEN OF PROMISE OF ORLANDO INC.

## Current Principal Place of Business:

7379 BORDWINE DR  
ORLANDO, FL 32818 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 616371  
ORLANDO, FL 32861

## New Mailing Address:

PO BOX 680458  
ORLANDO, FL 32868 US

FEI Number: 87-0750577

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MCRAE, SIMON  
7379 BORDWINE DR  
ORLANDO, FL 32818 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: DP ( ) Delete  
Name: WILLIAMS, ROBERT  
Address: 6372 EDGE O GROVE CIR.  
City-St-Zip: ORLANDO, FL 32319

Title: DVP ( ) Delete  
Name: WILLIAMSON, PAUL  
Address: 1043 LOVE LANE  
City-St-Zip: ORLANDO, FL 32703

Title: DS ( ) Delete  
Name: HICKEY, CLAUDE  
Address: 2970 N PINE HILLS RD APT. F-4  
City-St-Zip: ORLANDO, FL 32808

Title: T ( ) Delete  
Name: MCRAE, SIMON  
Address: 7379 BORDWINE DR  
City-St-Zip: ORLANDO, FL 32811

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MEADOWS, EUGENE  
Address: 731 W. COLUMBIA ST  
City-St-Zip: ORLANDO, FL 32805 US

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

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

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: EUGENE MEADOWS

DP

04/17/2008

Electronic Signature of Signing Officer or Director

Date