

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009026

FILED
Jan 03, 2006
Secretary of State

Entity Name: SVTOA OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2410 GRAND POPLAR ST
OCOOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

2410 GRAND POPLAR ST
OCOOEE, FL 34761

New Mailing Address:

FEI Number: 32-0146378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATTS, JERRY
1875 SOUTH ORLANDO AVE
MAITLAND, FL 32789 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: BUONO, MIKE
Address: 2401 GRAND POPLAR ST
City-St-Zip: OCOOEE, FL 34761

Title: AD () Delete
Name: BOYD, ED
Address: 3480 WOODLEY PARKPLAVE
City-St-Zip: OVIEDO, FL

Title: S () Delete
Name: CHAPMAN, KELLI
Address: 236 S SHADOW BAY DR
City-St-Zip: ORLANDO, FL 32825

Title: T () Delete
Name: DAVENPORT, GUY
Address: 470 SOUTH PIN OAK PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: MR () Delete
Name: TETLOW, FLIP
Address: 2254 RED GATE RD
City-St-Zip: ORLANDO, FL

Title: AC () Delete
Name: PHIPPS, ROGER
Address: 3006 HOLLAND DR
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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City-St-Zip:

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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 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: MIKE BUONO

D

01/03/2006

Electronic Signature of Signing Officer or Director

Date