# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2008**
**Secretary of State**

DOCUMENT# N06000008203

**Entity Name:** WEST ORANGE FOOD PANTRY INC.

**Current Principal Place of Business:**

452 PALM DR.
OCOEE, FL 34761

**New Principal Place of Business:**

**Current Mailing Address:**

452 PALM DR
OCOEE, FL 34761

**New Mailing Address:**

**FEI Number: 20-5321794** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

ARTIGAS, KENNETH
31917 ORANGE ST
SORRENTO, FL 32776 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: PRES ( ) Delete
Name: SARMIENTO, CARLOS
Address: 22717 STALLION DRIVE
City-St-Zip: SORRENTO, FL 32776

Title: DIR ( ) Delete
Name: MILLER, ROGER
Address: 668 BRUSHCREEK BLVD
City-St-Zip: OCOEE, FL 34761

Title: DIR ( ) Delete
Name: DAVID, BRALAND
Address: POST OFFICE BOX 751
City-St-Zip: OAKLAND, FL 34760

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

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

Title: DIR ( ) Change (X) Addition
Name: SUMAMPOW, PHIL
Address: 120 MCKEY ST
City-St-Zip: OCOEE, FL 34761

Title: DIR ( ) Change (X) Addition
Name: TORRES, ABE
Address: 120 MCKEY ST
City-St-Zip: OCOEE, FL 34761

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: CARLOS SARMIENTO PRES 04/29/2008

Electronic Signature of Signing Officer or Director — Date