

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008488

FILED
Apr 24, 2008
Secretary of State

Entity Name: KNIGHTS OF RIZAL, CENTRAL FLORIDA INC.

Current Principal Place of Business:

1025 W. OAK RIDGE RD.
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

1025 W. OAK RIDGE RD.
ORLANDO, FL 32809

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

YAP, HOOVER
1025 W. OAK RIDGE RD.
ORLANDO, FL 32809 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: P () Delete
Name: FLOYD, FRED
Address: 1025 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

Title: VP () Delete
Name: CURZ, ERIKK
Address: 1025 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

Title: T () Delete
Name: REYNOLDS, RAY
Address: 1025 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

Title: S () Delete
Name: SANTIAGO, JOEL
Address: 1025 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

Title: S () Delete
Name: YAP, HARLEY
Address: 1025 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

Title: A () Delete
Name: VERCELES, MANNY
Address: 1025 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CRUZ, ERIKK
Address: 1025 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

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: () 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: HOOVER YAP

RA

04/24/2008

Electronic Signature of Signing Officer or Director

Date