

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009104

FILED
Apr 28, 2009
Secretary of State

Entity Name: TKE ALUMNI ASSOCIATION OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

7800 LAKE DAWN DR
WINTER PARK, FL 32792 US

New Principal Place of Business:

Current Mailing Address:

7800 LAKE DAWN DR
WINTER PARK, FL 32792 US

New Mailing Address:

FEI Number: 20-5681502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALASCHAK, JAMES G
7800 LAKE DAWN DR
WINTER PARK, FL 32792 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: PD () Delete
Name: GRUMBLES, ROBERT
Address: 1333 SILVERTHORN DR
City-St-Zip: ORLANDO, FL 32825

Title: TD () Delete
Name: BALASCHAK, JAMES
Address: 600 LONG LAKE DR
City-St-Zip: OVIEDO, FL 32765

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: TD (X) Change () Addition
Name: BALASCHAK, JAMES
Address: 7800 LAKE DAWN DR
City-St-Zip: WINTER PARK, FL 32792

Title: S () Change (X) Addition
Name: GARDINER, SCOTT
Address: 10862 HEATHER RIDGE CIR APT 102
City-St-Zip: ORLANDO, FL 32817

Title: VP () Change (X) Addition
Name: ZEMAN, SPENCER
Address: 12815 ORPINGTON ST APT 631
City-St-Zip: ORLANDO, FL 32826

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: JAMES G BALASCHAK

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04/28/2009

Electronic Signature of Signing Officer or Director

Date