

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009104

FILED
Apr 20, 2012
Secretary of State

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

Current Principal Place of Business:

10713 CYPRESS TRAIL DRIVE
ORLANDO, FL 32825 US

New Principal Place of Business:

3049 GETTY WAY
APT 208
ORLANDO, FL 32835 US

Current Mailing Address:

10713 CYPRESS TRAIL DRIVE
ORLANDO, FL 32825 US

New Mailing Address:

3049 GETTY WAY
APT 208
ORLANDO, FL 32835 US

FEI Number: 20-5681502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WURME, BRIAN J
10713 CYPRESS TRAIL DRIVE
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

WURME, BRIAN J
3049 GETTY WAY
APT 208
ORLANDO, FL 32835 US

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:

04/20/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GRUMBLES, ROBERT
Address: 1333 SILVERTHORN DRIVE
City-St-Zip: ORLANDO, FL 32825

Title: T
Name: WURME, BRIAN J
Address: 3049 GETTY WAY #208
City-St-Zip: ORLANDO, FL 32835

Title: S
Name: CHUNG, WILL
Address: 860 N ORANGE AVE #225
City-St-Zip: ORLANDO, FL 32801

Title: VP
Name: BRIDGE, MAURICE
Address: 650 LITTLE WEKIVA ROAD
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby 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 all other like empowered.

SIGNATURE: BRIAN J WURME

T

04/20/2012

Electronic Signature of Signing Officer or Director

Date