

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2009
Secretary of State

DOCUMENT# N07000000824

Entity Name: CITY OF ORLANDO MAYOR'S MARTIN LUTHER KING, JR. HOLIDAY COMMISSION, INC.

Current Principal Place of Business:

400 SOUTH ORANGE AVE.
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

400 SOUTH ORANGE AVE.
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 20-8902577 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

IENNACO, AMY
400 SOUTH ORANGE AVE.
ORLANDO, FL 32801 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: CD () Delete
Name: JACKSON, KRISITA A
Address: 5457 GAMBIER CT.
City-St-Zip: ORLANDO, FL 32839

Title: VD () Delete
Name: HAND, BRANDON C
Address: 1298 BEACHVIEW AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: SD () Delete
Name: WIGGINS, GWENDOLYN A
Address: 400 SOUTH ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

Title: TD () Delete
Name: JAMES, SHIRLEY
Address: 400 SOUTH ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: MCGILL, REGINALD B
Address: 400 SOUTH ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

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: () 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: SHIRLEY JAMES

TD

06/16/2009

Electronic Signature of Signing Officer or Director

_____ Date