

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001181

FILED
Jan 27, 2011
Secretary of State

Entity Name: CALLAHAN NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1027 W POLK ST
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

PO BOX 551110
ORLANDO, FL 328551110

New Mailing Address:

FEI Number: 68-0172274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, ANNIE P
1027 W POLK STREET
ORLANDO, FL 32805 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: DP
Name: BROWN, ANNIE P
Address: 1027 WEST POLK STREET
City-St-Zip: ORLANDO, FL 32805

Title: DV
Name: WILLIAMS, JEROME T
Address: 1020 WEST POLK STREET
City-St-Zip: ORLANDO, FL 32805

Title: DS
Name: BUREY, JOSIE B
Address: 110 NORTH WESTMORELAND DRIVE
City-St-Zip: ORLANDO, FL 32805

Title: DT
Name: WILLIAMS, JEROME P
Address: 1020 WEST POLK STREET
City-St-Zip: ORLANDO, FL 32805

Title: D
Name: PETERSON, DOROTHY
Address: 722 W BENTLEY
City-St-Zip: ORLANDO, FL 32805

Title: D
Name: BRYANT, ALMA
Address: 114 NORTH WESTMORELAND DRIVE
City-St-Zip: ORLANDO, FL 32805

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: ANNIE PATRICIA BROWN

PRES

01/27/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date