## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000007297

FILED Feb 06, 2012 Secretary of State

Entity Name: LIFE SKILLS CENTER - ORANGE COUNTY, INC.

**Current Principal Place of Business:** New Principal Place of Business:

4526 S. ORANGE BLOSSOM TRAIL 4526 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32839

SUITE 101

ORLANDO, FL 32839

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 22368 2500 METROCENTRE BLVD.

SUITE 500 WEST PALM BEACH, FL 33416 WEST PALM BEACH, FL 33407

FEI Number: 20-0582247 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEAL, TONYA A DEAL, TONYA A 2500 MERTOCENTRE BLVD. 5096 NORTHERN LIGHTS DRIVE SUITE 500 GREENACRES, FL 33463 WEST PALM BEACH, FL 33407 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: TONYA A. DEAL 02/06/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

POLAN, MICHAEL Name:

Address: 821 S. LAKE PLEASANT ROAD

City-St-Zip: APOPKA, FL 32703

Title:

Name: STONE, HUDIE Address: 533 PETERSON PLACE City-St-Zip: ORLANDO, FL 32805 12

Title:

HARGETT, JEFFREY Name: Address: 1020 SOUTHERN OAK LANE City-St-Zip: APOPKA, FL 32712

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: MICHAEL POLAN Ρ 02/06/2012