

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008798

FILED
Apr 17, 2012
Secretary of State

Entity Name: A. PHILIP RANDOLPH INSTITUTE OF CENTRAL FLORIDA, INC.,

Current Principal Place of Business:

2220 EDGEWATER DRIVE
ORLANDO, FL 32804 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 568701
ORLANDO, FL 32856 US

New Mailing Address:

FEI Number: 26-0869243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSSINSKY & CATHCART, P.A.
2699 LEE ROAD
SUITE 101
ORLANDO, FL 32789 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: D/ED
Name: HANCOCK, PHYLLIS A
Address: 5418 LAKE MARGARET DRIVE - SUITE 1024
City-St-Zip: ORLANDO, FL 32812 US

Title: D/T
Name: BATTLES, ARTHUR
Address: 1569 POPPY AVE
City-St-Zip: ORLANDO, FL 32811 US

Title: D/S
Name: TYLER,, JOHN
Address: 1044 CANDLE BERRY ROAD
City-St-Zip: ORLANDO, FL 32825 US

Title: D/VP
Name: TILLMAN, DONALD
Address: 325 PEACOCK SPRINGS CT
City-St-Zip: GROVELAND, FL 34736 US

Title: D
Name: WHITEHEAD, CHARLES
Address: 12094 BLACKHEATH CIRCLE
City-St-Zip: ORLANDO, FL 32837 US

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: PHYLLIS A HANCOCK

D/ED

04/17/2012

Electronic Signature of Signing Officer or Director

Date