2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2008
Secretary of State

DOCUMENT# N07000009697

Entity Name: ORLANDO AFTERSHOCK, INC.

Current Principal Place of Business:

4479 YACHTMANS COURT
ORLANDO, FL 32812

New Principal Place of Business:

Current Mailing Address:

4479 YACHTMANS COURT
ORLANDO, FL 32812

New Mailing Address:

FEI Number: 75-3255027 **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:

MARCHENA AND GRAHAM, P.A.
976 LAKE BALDWIN LANE
SUITE 101
ORLANDO, FL 32814 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: P ( ) Delete
Name: LOBOZZO, DANIEL A
Address: 4479 YACHTMANS COURT
City-St-Zip: ORLANDO, FL 32812

Title: VP ( ) Delete
Name: WALSH, LISA
Address: 759 SCARBOROUGH HEIGHTS DRIVE
City-St-Zip: ORLANDO, FL 32828

Title: S ( ) Delete
Name: O'BORN, DAWN
Address: 9046 PALOS VERDE
City-St-Zip: ORLANDO, FL 32812

Title: T ( ) Delete
Name: COMBS, ANGELA L
Address: 4431 YACHTMANS COURT
City-St-Zip: ORLANDO, FL 32812

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:

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: DANIEL A. LOBOZZO P 07/10/2008

Electronic Signature of Signing Officer or Director — Date