

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011684

FILED
Mar 09, 2012
Secretary of State

Entity Name: FULLER CENTER FOR HOUSING OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1920 E ROBINSON ST
ORLANDO, FL 32802

New Principal Place of Business:

1920 E ROBINSON ST
ORLANDO, FL 32803

Current Mailing Address:

PO BOX 3306
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 26-1523465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, GEORGE H
1920 E ROBINSON ST
ORLANDO, FL 32802 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
Name: ANDERSON, GEORGE H.
Address: 1920 E ROBINSON ST
City-St-Zip: ORLANDO, FL 32802

Title: PRES
Name: JEWELL, ALAN
Address: 6 WEST MYRTLE STREET
City-St-Zip: APOPKA, FL 32703

Title: D
Name: JEWELL, KAREN
Address: 6 WEST MYRTLE STREET
City-St-Zip: APOPKA, FL 32703

Title: D
Name: KNODE, CHRIS
Address: 6 WEST MYRTLE STREET
City-St-Zip: APOPKA, FL 32703

Title: SEC
Name: GARRISON, DEBBIE
Address: 2109 SHAW LANE
City-St-Zip: ORLANDO, FL 32814

Title: TRES
Name: ANDERSON, JANETTE D
Address: 1438 CHATFIELD PLACE
City-St-Zip: ORLANDO, FL 32814

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: GEORGE H ANDERSON III

DIR

03/09/2012

Electronic Signature of Signing Officer or Director

Date