2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2008
Secretary of State

DOCUMENT# N07000011850

Entity Name: CENTRAL FLORIDA PARTNERSHIP, INC.

Current Principal Place of Business:

75 S. IVANHOE BLVD.
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

75 S. IVANHOE BLVD.
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 33-1202266 **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:

STUART, JACOB V
75 S. IVANHOE BLVD.
ORLANDO, FL 32804 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 ( ) Delete
Name: CUMMINGS, DES JR
Address: 2400 BEDFORD RD. 4TH FLOOR
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: ENGFER, PATRICIA J
Address: 9300 AIRPORT BLVD.
City-St-Zip: ORLANDO, FL 32827

Title: D ( ) Delete
Name: HSU, C.T.
Address: 820 IRMA AVE.
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: LEWIS, JAMES M
Address: 200 CELEBRATION PLACE SUITE 210
City-St-Zip: CELEBRATION, FL 34747

Title: D ( ) Delete
Name: MOSSBURG, KELLEY P
Address: P.O. BOX 685061
City-St-Zip: ORLANDO, FL 328685061

Title: D ( ) Delete
Name: STUART, JACOB V
Address: P.O. BOX 1234
City-St-Zip: ORLANDO, FL 328021234

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:

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: JACOB V STUART D 07/18/2008

Electronic Signature of Signing Officer or Director — Date