

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 30, 2010
Secretary of State

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 ()

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
Name: CUMMINGS, DES JR
Address: 2400 BEDFORD RD. 4TH FLOOR
City-St-Zip: ORLANDO, FL 32803

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

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

Title: DP
Name: MARTINS, ALEX
Address: 75 S. IVANHOE BLVD.
City-St-Zip: ORLANDO, FL 32804

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

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

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: JACOB V. STUART

D

04/30/2010

Electronic Signature of Signing Officer or Director

Date