

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000786

FILED  
Jan 15, 2012  
Secretary of State

**Entity Name:** SENIOR ORPHANS OF POLK COUNTY, INC.

**Current Principal Place of Business:**

2245 LONGLEAF CIRCLE  
LAKELAND, FL 33810

**New Principal Place of Business:**

**Current Mailing Address:**

2245 LONGLEAF CIRCLE  
LAKELAND, FL 33810

**New Mailing Address:**

**FEI Number:** 59-3484454

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUNLAP, III, GEORGE T ATTY  
245 SOUTH CENTRAL AVENUE  
BARTOW, FL 33830 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: PD  
Name: CORNELIUS, BEVERLY  
Address: 2245 LONGLEAF CIRCLE  
City-St-Zip: LAKELAND, FL 33810

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: BEVERLY CORNELIUS

PD

01/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date