

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005634

FILED  
Jul 11, 2009  
Secretary of State

Entity Name: TEAM FLORIDA ORLANDO, INC

## Current Principal Place of Business:

1001 AVALON PARK BLVD  
ORLANDO, FL 32828 US

## New Principal Place of Business:

## Current Mailing Address:

14661 MICHENER TRAIL  
ORLANDO, FL 32828 US

## New Mailing Address:

1001 AVALON PARK BLVD  
ORLANDO, FL 32828 US

FEI Number: FEI Number Applied For (X) 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:

HARVEY, TYRONE R JR  
14661 MICHENER TRAIL  
ORLANDO, FL 32828 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: HARVEY, TYRONE R JR  
Address: 14661 MICHENER TRAIL  
City-St-Zip: ORLANDO, FL 32828 US

Title: S ( ) Delete  
Name: MELVILLE, KRISTIN  
Address: 13981 MAGNOLIA GLEN CIRCLE  
City-St-Zip: ORLANDO, FL 32828 US

Title: T ( ) Delete  
Name: BOETTNER, CYNTHIA  
Address: 2741 BOLTON BEND  
City-St-Zip: ORLANDO, FL 32817 US

## 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:

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: TYRONE HARVEY

P

07/11/2009

Electronic Signature of Signing Officer or Director

Date