

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008879

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** CCN ORLANDO, INC.

**Current Principal Place of Business:**

3662 AVALON PARK EAST BLVD - SUITE 208  
ORLANDO, FL 32828

**New Principal Place of Business:**

3662 AVALON PARK EAST BLVD  
#208  
ORLANDO, FL 32828

**Current Mailing Address:**

P.O. BOX 677367  
ORLANDO, FL 32867

**New Mailing Address:**

FEI Number: 26-3421560

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GONZALEZ, GARY B  
2200 TWILIGHT TRAIL  
CHULUOTA, FL 32766 US

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

GONZALEZ, GARY B  
3662 AVALON PARK EAST BLVD #208  
ORLANDO, FL 32828 US

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

04/28/2011

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GONZALEZ, GARY B  
Address: 3662 AVALON PARK EAST BLVD #208  
City-St-Zip: ORLANDO, FL 32828

Title: D  
Name: GONZALEZ, CONSTANCE H  
Address: 3662 AVALON PARK EAST BLVD #208  
City-St-Zip: ORLANDO, FL 32828

Title: D  
Name: AVILA, AGAPITO  
Address: 3662 AVALON PARK EAST BLVD #208  
City-St-Zip: ORLANDO, FL 32828

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: GARY B GONZALEZ

D

04/28/2011

Electronic Signature of Signing Officer or Director

Date