

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 09, 2011
Secretary of State

Entity Name: ORANGE OSCEOLA SUBSTANCE ABUSE AND DEPENDENCY INC.

Current Principal Place of Business:

1637 E VINE STREET
SUITE 102
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

1637 E VINE STREET
SUITE 102
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 26-3984490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

IWANSKI, FRANETTE L
1637 E VINE STREET
SUITE 102
KISSIMMEE, FL 34744 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: T
Name: IWANSKI, FRANETTE L
Address: 917 JASMINE ST
City-St-Zip: CELEBRATION, FL 34747

Title: DVP
Name: IWANSKI, GREGORY F
Address: 917 JASMINE STREET
City-St-Zip: CELEBRATION, FL 34747

Title: P
Name: SHEPARD, WARREN L
Address: 5209 HEATHERSTONE CT
City-St-Zip: KISSIMMEE, FL 34758

Title: S
Name: NAPIER, JAMES
Address: 4750 CITRUS DRIVE
City-St-Zip: ST. CLOUD, FL 34772

Title: D
Name: MALONEY, PATRICK J
Address: 3180 OLD CANOE CREEK ROAD
City-St-Zip: ST. CLOUD, FL 34772

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: FRANETTE L. IWANSKI

T

03/09/2011

Electronic Signature of Signing Officer or Director

Date