

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000011315

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** ALPHA OMICRON PI, INC - TBAC

**Current Principal Place of Business:**

12708 EAGLES ENTRY DR.  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

12708 EAGLES ENTRY DR.  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 59-3542561

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOEDE, LORI  
12708 EAGLES ENTRY DR.  
ODESSA, FL 33556 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:** PRES  
**Name:** KEMPER, CRYSTAL PRES.  
**Address:** 3255 GRAND PINES DR  
**City-St-Zip:** LAKELAND, FL 33810

**Title:** VP  
**Name:** MOORE, KAELIN VP  
**Address:** 4110 CENTRAL SARASOTA PKWY, #135  
**City-St-Zip:** SARASOTA, FL 34238

**Title:** TREA  
**Name:** GOEDE, LORI TREAS.  
**Address:** 12708 EAGLES ENTRY DR.  
**City-St-Zip:** ODESSA, FL 33556

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:** LORI GOEDE

TREA

02/23/2010

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

\_\_\_\_\_  
Date