

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011315

FILED  
Jan 17, 2012  
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: ABBS, BEATTA PRES.  
Address: 16010 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556

Title: PRES  
Name: GALEANO, MEREDITH  
Address: 16314 COLWOOD DR  
City-St-Zip: ODESSA, FL 33556

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

Title: SEC  
Name: POLIZZI, SHANNON  
Address: 11522 GROVE ARCADE DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: VP  
Name: GOODCHILD, MELANIE  
Address: 4815 BELLE CHASE CIR.  
City-St-Zip: TAMPA, FL 33634

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

01/17/2012

Electronic Signature of Signing Officer or Director

Date