

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004280

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Entity Name:** FLORIDIANS FOR RESPONSIBLE POLICY, INC.

**Current Principal Place of Business:**

1600 WEST IVANHOE BOULEVARD  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1967  
ORLANDO, FL 32802

**New Mailing Address:**

**FEI Number:** 26-4780484

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASHER, ANDREW L  
4767 NEW BROAD STREET  
ORLANDO, FL 32814 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: DP  
Name: KEFAUVER, JOE  
Address: P.O. BOX 1967  
City-St-Zip: ORLANDO, FL 32802 US

Title: D  
Name: CHAPIN, ROGER  
Address: 1600 WEST LAKE IVANHOE  
City-St-Zip: ORLANDO, FL 32804 US

Title: DS  
Name: ASHER, ANDREW L  
Address: 4767 NEW BROAD STREET  
City-St-Zip: ORLANDO, FL 32814 US

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: ANDREW L. ASHER

SD

03/14/2011

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

\_\_\_\_\_  
Date