

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001654

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** THE ORLANDO SISTERS, INC.

**Current Principal Place of Business:**

1508 ARTHUR STREET  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

622 LAKESPUR LANE  
ALTAMONTE SPRINGS, FL 32714 US

**Current Mailing Address:**

P.O. BOX 3665  
WINTER PARK, FL 32790 US

**New Mailing Address:**

**FEI Number:** 27-1933519

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARSONS, JONATHAN  
1508 ARTHUR ST.  
ORLANDO, FL 32804 US

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

EYAL, OFIR  
622 LAKESPUR LANE  
ALTAMONTE SPRINGS, FL 32714 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: OFIR EYAL

01/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: DONAHOO, LOGAN W  
Address: 2821 BONGART RD.  
City-St-Zip: WINTER PARK, FL 32792 US

Title: P  
Name: SEABLOM, WILLIAM  
Address: 7130 AMERICANA DR. NE  
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: S  
Name: PARHAM, MILTON  
Address: P.O. BOX 1208  
City-St-Zip: OCOEE, FL 34761 US

Title: T  
Name: EYAL, OFIR  
Address: 622 LAKESPUR LN  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 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: OFIR EYAL

T

01/06/2012

Electronic Signature of Signing Officer or Director

Date