

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

DOCUMENT# N10000002245

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA TECHNOLOGY FORUM, INC.

**Current Principal Place of Business:**

301 E. PINE ST.  
STE. 900  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

653 W. MICHIGAN ST.  
ORLANDO, FL 32805 US

**Current Mailing Address:**

301 E. PINE ST.  
STE. 900  
ORLANDO, FL 32801 US

**New Mailing Address:**

653 W. MICHIGAN ST.  
ORLANDO, FL 32805 US

**FEI Number:** 45-1868637

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FARIS, SCOTT  
653 W. MICHIGAN ST.  
ORLANDO, FL 32805 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: PD  
Name: FARIS, SCOTT  
Address: 653 W. MICHIGAN ST.  
City-St-Zip: ORLANDO, FL 32805 US

Title: SD  
Name: HOLT, PHILIP  
Address: 653 W. MICHIGAN ST.  
City-St-Zip: ORLANDO, FL 32805 US

Title: TD  
Name: EVANOFF, MICHAEL  
Address: 653 W. MICHIGAN ST.  
City-St-Zip: ORLANDO, FL 32805 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:** SCOTT FARIS

P

04/25/2011

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

\_\_\_\_\_  
Date