

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005999

FILED  
Jul 19, 2012  
Secretary of State

**Entity Name:** ALL FLORIDA NEIGHBORHOOD ACTION, INC

**Current Principal Place of Business:**

1216 N PINE HILLS RD  
ORLANDO, FL 32808

**New Principal Place of Business:**

**Current Mailing Address:**

1216 N PINE HILLS RD  
ORLANDO, FL 32808

**New Mailing Address:**

**FEI Number:** 80-0615534

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LORFILS, THERVILIEN  
1216 N PINE HILLS RD  
ORLANDO, FL 32808 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:** P  
**Name:** LORFILS, THERVILIEN  
**Address:** 1216 N PINE HILLS RD  
**City-St-Zip:** ORLANDO, FL 32808

**Title:** S  
**Name:** RAPPEPORT, ANDREW H  
**Address:** 127 N 10TH STREET  
**City-St-Zip:** HAINES CITY, FL 33844

**Title:** T  
**Name:** ESTAFORT, ALIUS  
**Address:** 3310 SASSAQUIN CT  
**City-St-Zip:** ORLANDO, FL 32818

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:** THERVILIEN LORFILS

MGR

07/19/2012

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

\_\_\_\_\_  
Date