

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 22, 2011
Secretary of State

DOCUMENT# N10000008819

Entity Name: ORLANDO HACKERSPACES, INC.**Current Principal Place of Business:**540 N STATE ROAD 434
UNIT 108
ALTAMONTE SPRINGS, FL 32714**New Principal Place of Business:****Current Mailing Address:**PO BOX 162789
ALTAMONTE SPRINGS, FL 32716**New Mailing Address:**PO BOX 181096
CASSELBERRY, FL 327181096**FEI Number:** 27-3490023**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: LEWIS, DANIEL R
Address: 4442 SANDHURST DR
City-St-Zip: ORLANDO, FL 32817

Title: VP
Name: BURROUGHS, DANIEL
Address: 492 MISTY OAKS RUN
City-St-Zip: CASSELBERRY, FL 32707

Title: T
Name: COLE, IAN
Address: 5314 SHADYWOOD LN
City-St-Zip: ORLANDO, FL 32819

Title: S
Name: HOOPER, MACK S
Address: 1281 MANCHESTER ROAD
City-St-Zip: MAITLAND, FL 32751

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: MACK S HOOPER

S

09/22/2011

Electronic Signature of Signing Officer or Director

Date