

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17519

FILED
Apr 20, 2009
Secretary of State

Entity Name: CASA DE ESPANA DE LA FLORIDA CENTRAL, INC.

Current Principal Place of Business:

1700 EDGEWATER DR.
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

P O BOX 300277
FERN PARK, FL 32730 US

New Mailing Address:

FEI Number: 59-2699834 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EWEN, MARIA T
5206 FORZLEY STREET
ORLANDO, FL 32812 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 () Delete
Name: GOMEZ, MIGUEL
Address: 2319 DRIFTWOOD DRIVE
City-St-Zip: FERN PARK, FL 32730

Title: V () Delete
Name: KRISTMANN, MARY L
Address: 6142 RAINTREE DRIVE
City-St-Zip: ORLANDO, FL 32822

Title: T () Delete
Name: EWEN, MARIA T
Address: 5206 FORZLEY STREET
City-St-Zip: ORLANDO, FL 32812

Title: S () Delete
Name: ROLLON, VICTOR
Address: 2828 ROUNDABOUT KANE
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: CANO-MORENO, DONATO
Address: 1180 BENJI RIDGE COURT
City-St-Zip: KISSIMMEE, FL 34747

Title: PRD () Delete
Name: VALDIVIA, TERESA
Address: 128 E LAUREN COURT
City-St-Zip: FERN PARK, FL 32730

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ARCIA, GLADIS-HUMBERT
Address: 511 ESTHER STREET
City-St-Zip: ORLANDO, FL 32806

Title: PRD (X) Change () Addition
Name: REYNOLDS, LUCILA
Address: 8810 HAVASU DRIVE
City-St-Zip: ORLANDO, FL 32829

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARIA T. EWEN

T

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date