

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22795

FILED
Mar 05, 2009
Secretary of State

Entity Name: ALTAMONTE SPRINGS CITY EMPLOYEES ORGANIZATION, INC.

Current Principal Place of Business:

CITY HALL
225 NEWBURYPORT AVENUE
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

225 NEWBURYPORT AVENUE
CITY HALL
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

CITY HALL
225 NEWBURYPORT AVENUE
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

225 NEWBURYPORT AVENUE
CITY HALL
ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-2848368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALESKA ROXANA SCHUSTER FINANCE DEPT
225 NEWBURYPORT AVE
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

MARTINEZ DAISSY - LEISURE- LIBRARY
225 NEWBURYPORT AVE
CITY HALL
ALTAMONTE SPRINGS, FL 32701 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: DAISSY MARTINEZ

03/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ACOSTA, RICHARD
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP () Delete
Name: POLACHECK, MATTHEW
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S () Delete
Name: EL-KHOURY, MARIE
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T () Delete
Name: SCHUSTER, WALESKA R
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: AC () Delete
Name: ROWLAND, GAYLE
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: AAC () Delete
Name: KOUELKA, VERONICA
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POLACHECK, MATTHEW B
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: PE (X) Change () Addition
Name: ADKINS, SIBIL
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S (X) Change () Addition
Name: JULIO, FORERO
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T (X) Change () Addition
Name: MARTINEZ, DAISSY
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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

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

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: MATTHEW POLACHECK

D

03/05/2009

Electronic Signature of Signing Officer or Director

Date