2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23783

FILED Mar 19, 2009 Secretary of State

Entity Name: ORLANDO CARNIVAL ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1828 COLUMBINE DR ORLANDO, FL 32818 US **Current Mailing Address: New Mailing Address:** P.O. BOX 680945 ORLANDO, FL 328680945 FEI Number: 59-2776939 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, MERVYN 1828 COLUMBINE DR US ORLANDO, FL 32818 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JOHNSON, MERVYN R Name: Name: 1828 COLUMBINE DR Address: Address: City-St-Zip: ORLANDO, FL 32818 US City-St-Zip: Title: () Delete Title: (X) Change () Addition ALLMAN, MICHELLE E Name: BRIZAN, MAUREEN Name: Address: 8070 VILLAGE GREEN ROAD Address: 4732 BEACON STREET City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32808 Title: () Delete Title: (X) Change () Addition CHANDLER, GLORIA M ROWLEY, JOANNE Name: Name: 1828 COLUMBINE DR Address: Address: 1036 OAKDALE STREET City-St-Zip: ORLANDO, FL 32808 City-St-Zip: WINDERMERE, FL 32786 Title: () Delete Title: (X) Change () Addition Name: KING, MARILYN Name: CHANDLER, GLORIA 14 WHITE MARSH CIRCLE 1828 COLUMBINE DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32818 Title: PRM () Delete Title: () Change () Addition MAHADEO, CARL Name: Name: 3218 CASTLE OAK AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: Title: () Delete Title: (X) Change () Addition MAHADEO, CARL BRIZAN, MAUREEN Name: Name: Address: 4732 BEACON STREET Address: 3218 CASTLE OAK AVENUE ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32808 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: GLORIA M. CHANDLER SEC 03/19/2009