

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28203

FILED
Jul 29, 2005
Secretary of State

Entity Name: AL-ANON INFORMATION SERVICE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

314 1/2 SO BUMBY AVE
ORLANDO, FL 32803 US

New Principal Place of Business:

320 SO BUMBY AVE
SUITE 6
ORLANDO, FL 32803 US

Current Mailing Address:

314 1/2 SO BUMBY AVE
ORLANDO, FL 32803 US

New Mailing Address:

320 SO BUMBY AVE
SUITE 6
ORLANDO, FL 32803 US

FEI Number: 59-3144094 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SANE, DARLA
1408 GRANDVIEW BLVD
KISSIMMEE, FL 34744 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: CD () Delete
Name: RISPOLI, GRACE E
Address: 5136 STRATE MEYER DRIVE
City-St-Zip: ORLANDO, FL 32839

Title: MD () Delete
Name: BURTON, CAROLYN
Address: 333 MADEIRA AVE
City-St-Zip: ORLANDO, FL 32825

Title: TD () Delete
Name: SANE, DARLA
Address: 1408 GRANDVIEW BLVD
City-St-Zip: KISSIMMEE, FL 34744

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: MILLER, LOIS
Address: 7234 DELLA DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: CO C (X) Change () Addition
Name: SANE, DARLA
Address: 1408 GRANDVIEW BLVD.
City-St-Zip: KISSIMMEE, FL 34744

Title: TD (X) Change () Addition
Name: STUCKEY, MARIE
Address: 1214 GREENWOOD
City-St-Zip: ORLANDO, FL 32801

Title: SEC. () Change (X) Addition
Name: MEYERS, MARTHA
Address: 4914 SAMOA CIRCLE
City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DARLA SANE

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07/29/2005

Electronic Signature of Signing Officer or Director

Date