## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N29144

FILED Jan 16, 2009 Secretary of State

Entity Name: ORLANDO METROPOLITAN BRIDGE CENTER, INC.

Current Principal Place of Business:		e of Business:	New Principal Place of Business:	
	NETT ROAD O, FL 32803	US		
urrent N	lailing Addre	ss:	New Mailing Addres	s:
	NETT ROAD O, FL 32803	US		
El Number	: 59-2921911	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
708 EAS	IAN, JOHN W T PINE STREI O, FL 32803	ET US		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
the Stat	e of Florida. ´ RE:	submits this statement for the		d office or registered agent, or both,  Date
the Stat	e of Florida. ´ RE:	nic Signature of Registered Ac	gent	
the Stat GNATU	e of Florida.  RE: Electro  S AND DIREC	nic Signature of Registered Ac CTORS: ) Delete NCY DRIVE	gent	Date
the Stat GNATU  FFICER le: me: dress: y-St-Zip: le: me: dress:	e of Florida.  RE: Electro  S AND DIREC  P ( HAGERTY, NA 2530 EKANA OVIEDO, FL 3  V ( SUSAN, ROW	nic Signature of Registered Acc CTORS:  ) Delete NCY DRIVE 32708 US  ) Delete LEY AL BLVD APT 1805	gent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO
the Stat GNATU FFICER le: ume: dress:	e of Florida.  RE: Electro  S AND DIREC  P (HAGERTY, NA 2530 EKANA OVIEDO, FL 3  V (SUSAN, ROWI 530 E CENTRA ORLANDO, FL	nic Signature of Registered Age CTORS:  ) Delete INCY DRIVE 32708 US  ) Delete LEY AL BLVD APT 1805  . 32801 US  ) Delete Y TON PARK	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition

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: JOHN CHRISTMAN T 01/16/2009