

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32882

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA LOCKSMITH ASSOCIATION, INC.

**Current Principal Place of Business:**

BOX 204  
WINTER PARK, FL 327900204

**New Principal Place of Business:**

BOX 518  
ORMOND BEACH, FL 321750518 US

**Current Mailing Address:**

P.O. BOX 518  
ORMOND BEACH, FL 321760518 US

**New Mailing Address:**

P.O. BOX 518  
ORMOND BEACH, FL 321750518 US

**FEI Number:** 59-2973766

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PARTINGTON II, W E  
1284 FERNWAY DRIVE  
ORMOND BCH, FL 32174 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: V  
Name: HOTALING, DOUGLAS  
Address: 712 SOUTH HWY 27  
City-St-Zip: MINNEOLA, FL 34715 US

Title: P  
Name: KESSLER, BRIAN  
Address: P.O. BOX 490161  
City-St-Zip: LEESBURG, FL 34749 US

Title: T  
Name: ADAMS, MICHAEL  
Address: 411 4TH ST  
City-St-Zip: HAYNES CITY, FL 33844 US

Title: S  
Name: BILLINGS, DYSON  
Address: 1610 14TH ST.  
City-St-Zip: ORANGE CITY, FL

Title: V  
Name: RANDAZZO, VINCENT  
Address: 2088 LAKEBRIDGE WAY  
City-St-Zip: DELTONA, FL 32738 US

I hereby 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 all other like empowered.

**SIGNATURE:** W E PARTINGTON II

RA

02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date