

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33880

FILED  
Feb 11, 2009  
Secretary of State

**Entity Name:** THE ORLANDO RADIO CONTROL HELICOPTER SOCIETY, INC.

**Current Principal Place of Business:**

1755 CEDAR STONE CT  
LAKE MARY, FL 327464615 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 952644  
LAKE MARY, FL 327952644 US

**New Mailing Address:**

**FEI Number:** 20-2081083

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHURLEY, WILLIAM C  
1755 CEDAR STONE CT  
LAKE MARY, FL 327464615 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: D ( ) Delete  
Name: HIATT, CLIFFORD  
Address: 14218 LAKE TILDEN BLVD.  
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Delete  
Name: SHURLEY, CAREY,  
Address: 1755 CEDARSTONE CT  
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete  
Name: HATHAWAY, STEVE  
Address: 3934 PORT SIMBOR AVE.  
City-St-Zip: ORLANDO, FL 32817

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: CAREY SHURLEY

D

02/11/2009

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

\_\_\_\_\_  
Date