

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39591

FILED
Feb 08, 2010
Secretary of State

Entity Name: VARIETY - THE CHILDREN'S CHARITY OF FLORIDA, INC.

Current Principal Place of Business:

3315 MAGGIE BLVD
100
ORLANDO, FL 32811 US

Current Mailing Address:

3315 MAGGIE BLVD
100
ORLANDO, FL 32811 US

FEI Number: 59-3030272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DRAVES, DONNA L
120 EAST CONCORD ST
ORLANDO, FL 32801 US

New Principal Place of Business:

520 NORTH SEMORAN BOULEVARD
SUITE 220
ORLANDO, FL 32807 US

New Mailing Address:

520 NORTH SEMORAN BOULEVARD
SUITE 220
ORLANDO, FL 32807 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: PD
Name: WINTERS, ROBERT D
Address: 520 NORTH SEMORAN BOULEVARD, SUITE 220
City-St-Zip: ORLANDO, FL 32807 US

Title: ED
Name: SESTER, JOLIE P
Address: 520 NORTH SEMORAN BOULEVARD, SUITE 220
City-St-Zip: ORLANDO, FL 32807

Title: 1VPD
Name: SMITH, ART W JR
Address: 520 NORTH SEMORAN BOULEVARD, SUITE 220
City-St-Zip: ORLANDO, FL 32807 US

Title: D
Name: DRAVES, ALLAN C
Address: 520 NORTH SEMORAN BOULEVARD, SUITE 220
City-St-Zip: ORLANDO, FL 32807 US

Title: D
Name: DRAVES, DONNA L
Address: 520 NORTH SEMORAN BOULEVARD, SUITE 220
City-St-Zip: ORLANDO, FL 32807 US

Title: 2VPD
Name: BRANCH, MICHAEL MD
Address: 520 NORTH SEMORAN BOULEVARD, SUITE 220
City-St-Zip: ORLANDO, FL 32807 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: JOLIE PATRICIA SESTER

ED

02/08/2010

Electronic Signature of Signing Officer or Director

Date