

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47252

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** THE MANUFACTURERS ASSOCIATION OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

301 E. PINE STREET  
SUITE 900  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

301 E. PINE STREET  
SUITE 900  
ORLANDO, FL 32801 US

**New Mailing Address:**

**FEI Number:** 59-3124293

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWMAN, BENJAMIN W ESQ  
315 E. ROBINSON STREET  
SUITE 510  
ORLANDO, FL 32801 US

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

REEVES, SHERRY L  
301 E. PINE STREET  
SUITE 900  
ORLANDO, FL 32801 US

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: SHERRY L REEVES

02/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MULLER, TOM  
Address: 301 E. PINE STREET, SUITE 900  
City-St-Zip: ORLANDO, FL 32801

Title: VPD  
Name: STIMAC, AL  
Address: 301 E. PINE STREET, SUITE 900  
City-St-Zip: ORLANDO, FL 32801

Title: ED  
Name: REEVES, SHERRY L  
Address: 301 E. PINE STREET, SUITE 900  
City-St-Zip: ORLANDO, FL 32801

Title: TR  
Name: CALISE, LARRY  
Address: 301 E. PINE STREET, SUITE 900  
City-St-Zip: ORLANDO, FL 32801

Title: VPD  
Name: SWEAT, RICHARD  
Address: 301 E. PINE STREET, SUITE 900  
City-St-Zip: ORLANDO, FL 32801

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: SHERRY REEVES

ED

02/21/2011

Electronic Signature of Signing Officer or Director

Date