

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48508

**FILED**  
**May 04, 2010**  
**Secretary of State**

**Entity Name:** SCHOOL CLOTHES MAKE A DIFFERENCE, INC.

**Current Principal Place of Business:**

434 N TAMPA AVE.  
ORLANDO, FL 32805 US

**New Principal Place of Business:**

**Current Mailing Address:**

434 N TAMPA AVE.  
ORLANDO, FL 32805 US

**New Mailing Address:**

**FEI Number:** 59-3115112      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TREUTING, SUZANNE  
6944 SUGARBUSH DRIVE  
ORLANDO, FL 32819 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:** PRES  
**Name:** O'BRIEN, KAREN  
**Address:** 6617 PAMPUS  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** TREA  
**Name:** TREUTING, SUZANNE  
**Address:** 6944 SUGARBUSH DRIVE  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** D  
**Name:** SAWYER, CINDY  
**Address:** 5146 NORTH PINE HILLS ROAD  
**City-St-Zip:** ORLANDO, FL 32808

**Title:** D  
**Name:** DRAKE, GEORGE  
**Address:** 2747 FIELDSTONE COURT  
**City-St-Zip:** ORLANDO, FL 32839

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: KAREN O'BRIEN

PRES

05/04/2010

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

\_\_\_\_\_  
Date