

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48711

FILED
Jul 31, 2009
Secretary of State

Entity Name: ORANGE COUNTY RESERVE FIREFIGHTERS ASSOCIATION, INC.

Current Principal Place of Business:

6590 AMORY CT.
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5879
WINTER PARK, FL 327935879

New Mailing Address:

FEI Number: 59-3161289 **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:

ELLIS, WILLIAM
14031 ZEPHERMOOR LN
WINTER GARDEN, FL 34787 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 () Delete
Name: O'NEIL, DOUG
Address: 11727 OXFORDSHIRE PLACE
City-St-Zip: ORLANDO, FL 32829

Title: VD () Delete
Name: HOWELL, WALT
Address: 221 EAST PRINCE ST
City-St-Zip: ORLANDO, FL 32809

Title: TD () Delete
Name: ELLIS, WILLIAM
Address: 14031 ZEPHERMOOR LN
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD (X) Delete
Name: CODERRE, MARTIN W
Address: 7727 RANGE DR,
City-St-Zip: ORLANDO, FL 32810

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:

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: WILLIAM ELLIS

TD

07/31/2009

Electronic Signature of Signing Officer or Director

Date