

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50988

FILED
Apr 10, 2012
Secretary of State

Entity Name: AREA AGENCY ON AGING OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

988 WOODCOCK RD
STE 200
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

988 WOODCOCK RD
STE 200
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-3144723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNT, RANDALL D MR.
988 WOODCOCK RD
SUITE 200
ORLANDO, FL 32803 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: P
Name: KELLY, KERRY MR
Address: 334 PONCE DE LEON
City-St-Zip: ORLANDO, FL 32801

Title: V
Name: BRIMER, MARK MR
Address: 1333 GATEWAY DR, SUITE 1020
City-St-Zip: MELBOURNE, FL 32901

Title: S
Name: PAIGE, LINDA MS
Address: 1419 S RIVERSIDE DR
City-St-Zip: INDIALANTIC, FL 32903

Title: T
Name: PALMER, DOUGLAS MR
Address: 1201 S ORLANDO AVE, SUITE 400
City-St-Zip: WINTER PARK, FL 32789

Title: D
Name: RILEY, KRAN MR
Address: 2183 SAN JOSE BLVD
City-St-Zip: ORLANDO, FL 32808

Title: D
Name: CLARK, KATHERINE MS
Address: 9342 WHITTINGHAM DR
City-St-Zip: ORLANDO, FL 32817

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: RANDALL HUNT

CEO

04/10/2012

Electronic Signature of Signing Officer or Director

Date