

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000104

FILED
Apr 30, 2011
Secretary of State

Entity Name: LEARNING INSTITUTE FOR ELDERLY AT UNIVERSITY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

301B PSYCHOLOGY BLDG.
ORLANDO, FL 32816 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 161390
ORLANDO, FL 32816 US

New Mailing Address:

FEI Number: 59-3159632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMES, KERMIT L JR
2657 ORCHARD DR.
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

KING, IAN J TD
715 S. ENDEAVOUR DRIVE
WINTER SPRINGS, FL 32708 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: IAN J. KING

04/30/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: KING, IAN J
Address: 715 S. ENDEAVOUR DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: PD
Name: EASTERLING, PHIL
Address: 1328 OVERLAKE AVE
City-St-Zip: ORLANDO, FL 32806

Title: VPD
Name: WIENER, MARTIN
Address: 9455 BELMONT TERRACE
City-St-Zip: OVIEDO, FL 32765

Title: SD
Name: REINHARDT, ALICE
Address: 100 FAIRWAY POINTE CIR.
City-St-Zip: ORLANDO, FL 32828

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: IAN J. KING

TD

04/30/2011

Electronic Signature of Signing Officer or Director

Date