

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000864

FILED
Feb 10, 2006
Secretary of State

Entity Name: CENTRAL FLORIDA BUSINESS TRAVEL ASSOCIATION, INC.

Current Principal Place of Business:

3208C E. COLONIAL DR
SUITE 293 PMB 293
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

3208C E. COLONIAL DR
SUITE 293 PMB 293
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NAZARIO, AUDREY D
315 N. BUMBY AVENUE
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

ANDRY, STEPHANIE
3208 C EAST COLONIAL DRIVE
293
ORLANDO, FL 32803 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: STEPHANIE ANDRY

02/10/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BENHKE, SUE
Address: 5500 HAZELTON NATIONAL DR
City-St-Zip: ORLANDO, FL 32812

Title: VP/IA () Delete
Name: BEHAL, FLO
Address: 605 CRESCENT EXECUTIVE CT., STE 600
City-St-Zip: LAKE MARY, FL 32746

Title: P () Delete
Name: ANDRY, STEPHANIE
Address: 270 DOUGLAS AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S () Delete
Name: KLEIN, LISA
Address: 7499 AUGUSTA NATIONAL DR.
City-St-Zip: ORLANDO, FL 32822

Title: D () Delete
Name: NAZARIO, AUDREY
Address: 315 NORTH BUMBY AVENUE
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LEQUIER, MARION
Address: 285 INTERNATIONAL PARKWAY
City-St-Zip: LAKE MARY, FL 32746

Title: VP/IA (X) Change () Addition
Name: HARRILCHAK, DEBORAH
Address: 8600 HANGAR BOULEVARD
City-St-Zip: ORLANDO, FL 32822

Title: VPD (X) Change () Addition
Name: FORE, NATALIE
Address: ONE HUGHES WAY
City-St-Zip: ORLANDO, FL 32805

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PP (X) Change () Addition
Name: ANDRY, STEPHANIE
Address: 270 DOUGLAS AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHANIE ANDRY

PP

02/10/2006

Electronic Signature of Signing Officer or Director

Date