

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000947

FILED  
Mar 04, 2010  
Secretary of State

**Entity Name:** TRI-COUNTY LEAGUE OF CITIES, INC.

**Current Principal Place of Business:**

36 W PINE STREET  
SUITE #204  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

122443 RESEARCH PARKWAY  
SUITE #402  
ORLANDO, FL 32826 US

**Current Mailing Address:**

36 W PINE STREET  
SUITE #204  
ORLANDO, FL 32801 US

**New Mailing Address:**

122443 RESEARCH PARKWAY  
SUITE #402  
ORLANDO, FL 32826 US

**FEI Number:** 65-0534661

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CROTTY, MARILYN E  
36 WEST PINE ST, SUITE #204  
ORLANDO, FL 32801 US

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

CROTTY, MARILYN E  
12443 RESEARCH PARKWAY SUITE 402  
ORLANDO, FL 32826 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:

03/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BUSH, JOHN  
Address: 12443 RESEARCH PARKWAY SUITE 402  
City-St-Zip: ORLANDO, FL 32826

Title: P  
Name: BRUHN, GARY  
Address: 12443 RESEARCH PARKWAY SUITE 402  
City-St-Zip: ORLANDO, FL 32826

Title: VD  
Name: TILL, KATHY  
Address: 12443 RESEARCH PARKWAY SUITE 402  
City-St-Zip: ORLANDO, FL 32826

Title: D  
Name: BATES, PAT  
Address: 12443 RESEARCH PARKWAY SUITE 402  
City-St-Zip: ORLANDO, FL 32826

Title: D  
Name: BROOKS, BILL  
Address: 12443 RESEARCH PARKWAY SUITE 402  
City-St-Zip: ORLANDO, FL 32826

Title: VD  
Name: SWAN, JIM  
Address: 12443 RESEARCH PARKWAY SUITE 402  
City-St-Zip: ORLANDO, FL 32826

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: MARILYN E. CROTTY

DIR

03/04/2010

Electronic Signature of Signing Officer or Director

Date