

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000947

FILED
Mar 29, 2012
Secretary of State

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

Current Principal Place of Business:

122443 RESEARCH PARKWAY
SUITE #402
ORLANDO, FL 32826 US

New Principal Place of Business:

Current Mailing Address:

122443 RESEARCH PARKWAY
SUITE #402
ORLANDO, FL 32826 US

New Mailing Address:

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
12443 RESEARCH PARKWAY SUITE 402
ORLANDO, FL 32826 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: KREBS, JOANNE
Address: 12443 RESEARCH PARKWAY SUITE 402
City-St-Zip: ORLANDO, FL 32826

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

Title: VD
Name: ORTIZ, TONY
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: VD
Name: DURSO, JOE
Address: 12443 RESEARCH PARKWAY SUITE 402
City-St-Zip: ORLANDO, FL 32826

Title: D
Name: WILSEN, ROSEMARY
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

ED

03/29/2012

Electronic Signature of Signing Officer or Director

_____ Date