

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001854

FILED
Mar 26, 2012
Secretary of State

Entity Name: TRAINING AND SIMULATION TECHNOLOGY CONSORTIUM, INC.

Current Principal Place of Business:

3039 TECHNOLOGY PARKWAY
212- 215
ORLANDO, FL 32826 US

New Principal Place of Business:

3039 TECHNOLOGY PARKWAY
SUITES 212- 215
ORLANDO, FL 32826 US

Current Mailing Address:

PO BOX 781342
ORLANDO, FL 32878 US

New Mailing Address:

FEI Number: 59-3239132 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FREY, LOU
215 NORTH EOLA DRIVE
ORLANDO, FL 32801 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: ED
Name: BAPTISTE, THOMAS L
Address: 3039 TECHNOLOGY PARKWAY, SUITE 213
City-St-Zip: ORLANDO, FL 32826

Title: C
Name: MANNING, DAVID
Address: 241 CAROLYN DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: S
Name: HOLMES, BRIAN
Address: 12000 RESEARCH PARKWAY, SUITE 236
City-St-Zip: ORLANDO, FL 32826

Title: VC
Name: SALVA, ANGELA
Address: 711 WEST AMELIA ST., SUITE I
City-St-Zip: ORLANDO, FL 32805

Title: T
Name: PAINTER, STEVEN
Address: 12249 SCIENCE DRIVE, SUITE 110
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: THOMAS L. BAPTISTE

ED

03/26/2012

Electronic Signature of Signing Officer or Director

Date