2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000783

Jaņ 20, 2<u>01</u>1 Secretary of State

Entity Name: ORLANDO/CENTRAL FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF RESIDENTIAL

PROPERTY MANAGERS, INC.

Current Principal Place of Business: New Principal Place of Business:

954 S ORLANDO AVE 605 CRESCENT EXECUTIVE COURT WINTER PARK, FL 32789

SUITE 332

LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

605 CRESCENT EXECUTIVE COURT 605 CRESCENT EXECUTIVE COURT

SUITE 332

LAKE MARY, FL 32746

FEI Number: 59-3334113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BEARD, SHAWN NELSON, CHRISTINA

954 S ÓRLANDO AVE 605 CRESCENT EXECUTIVE COURT SUITE 332

WINTER PARK, FL 32789 LAKE MARY, FL 32746 US 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.

LAKE MARY, FL 32746

SIGNATURE: CHRISTINA NELSON 01/20/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

LOPEZ, TINA Name:

Address: 605 CRESCENT EXECUTIVE COURT SUITE 332

City-St-Zip: LAKE MARY, FL 32746

Title:

Name: NELSON, CHRISTINA L

Address: 605 CRESCENT EXECUTIVE COURT, SUITE 332

City-St-Zip: LAKE MARY, FL 32746

Title: ST

ROBERTS, MARTY Name: Address: PO BOX 1408

City-St-Zip: MOUNT DORA, FL 32756

Title:

Name: BRASSARD, MICHELE Address: 1425 W SR 434, SUITE 101 City-St-Zip: LONGWOOD, FL 32750

Title: COMM

Name: GONGAGE, LYDIA 890 NORTHERN WAY #C2 Address: WINTER SPRINGS, FL 32708 City-St-Zip:

Title:

LOPEZ, DAN Name:

Address: 605 CRESCENT EXECUTIVE COURT, SUITE 332

LAKE MARY, FL 32746 City-St-Zip:

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: CHRISTINA NELSON TD 01/20/2011