

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004503

FILED  
Feb 24, 2011  
Secretary of State

**Entity Name:** SENIORS NOW COMPUTER LEARNING CENTER, INC.

**Current Principal Place of Business:**

99 E. MARKS ST  
SUITE 112  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

99 E. MARKS ST  
SUITE 112  
ORLANDO, FL 32803 US

**New Mailing Address:**

**FEI Number:** 59-3401020

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPRINGALL, TOM  
8648 GREAT COVE DRIVE  
ORLANDO, FL 32819 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: SD  
Name: LONDON, EDITH  
Address: 2926 ST AUGUSTINE DR  
City-St-Zip: ORLANDO, FL 32825

Title: PD  
Name: SPRINGALL, TOM  
Address: 8648 GREAT COVE DR  
City-St-Zip: ORLANDO, FL 32819

Title: VD  
Name: BIGEL, SHELIA  
Address: 1676 KERSLEY CIRCLE  
City-St-Zip: HEATHROW, FL 32746

Title: TD  
Name: BYRD, LORENA  
Address: 153 PEACOCK DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: LORENA BYRD

TD

02/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date