

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004459

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: ORLANDO REEF DIVERS, INC.

## Current Principal Place of Business:

300 S ORANGE AVE  
LINCOLN PLAZA STE 1400  
ORLANDO, FL 32801 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 1863  
WINTER PARK, FL 32790 US

## New Mailing Address:

FEI Number: 59-3463227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIS, DAVID C  
LINCOLN PLAZA STE 1400  
300 S ORANGE AVE  
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: P ( ) Delete  
Name: MINGOIA, MICHELE  
Address: 980 MANCHESTER AVE.  
City-St-Zip: OVIEDO, FL 32765

Title: PE ( ) Delete  
Name: CHARITY, CRAIG  
Address: 367 HOLT AVE  
City-St-Zip: WINTER PARK, FL 32789

Title: DD ( ) Delete  
Name: BRODIE, ELENITA  
Address: 1158 CARMEL CIRCLE #RD  
City-St-Zip: CASSELBERRY, FL 32707

Title: T ( ) Delete  
Name: ROBERTS, KATHRYN  
Address: 2925 HUNTINGTON ST  
City-St-Zip: ORLANDO, FL 32803

Title: S (X) Delete  
Name: STEVANOVIC, LORA  
Address: 2332 HOFFNER RD  
City-St-Zip: ORLANDO, FL 32809

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BYERS, ROBERT  
Address: 3928 CARNABY DR  
City-St-Zip: OVIEDO, FL 32765

Title: S (X) Change ( ) Addition  
Name: BRODIE, ELENITA  
Address: 1158 CARMEL CIRCLE, #120  
City-St-Zip: CASSELBERRY, FL 32707

Title: DD (X) Change ( ) Addition  
Name: HILL, MCCOY  
Address: 980 MANCHESTER AVE  
City-St-Zip: OVIEDO, FL 32765

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHRYN S. ROBERTS

T

02/25/2009

Electronic Signature of Signing Officer or Director

Date