## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000000551

FILED May 06, 2007 Secretary of State

Entity Name: ORLANDO POSTAL EMPLOYEES' RECREATION CLUB, INCORPORATED

Current P	Principal Place of Business:	New Principal Place of Business:	
	RC DRIVE MERE, FL 34786		
Current N	Mailing Address:	New Mailing Address:	
2048 OPE WINDERN	RC DR MERE, FL 34786		
In accordan	r: 59-3519351 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did not d Address of Current Registered Agent:	FEI Number Not Applicable ( ) Certificate of Status Desired ( ) receive the prior notice.  Name and Address of New Registered Agent:	
ROMANO 2048 OPE	_		
	e named entity submits this statement for the pu e of Florida.	urpose of changing its registered office or registered agent, or b	oth,
SIGNATUI	DE:		
SICINATO			
SIGNATO	Electronic Signature of Registered Ager	nt Date	
		nt Date  ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS
OFFICER: Title: Name: Address:	Electronic Signature of Registered Ager		TORS
	Electronic Signature of Registered Ager S AND DIRECTORS:  DP ( ) Delete ROMANO, JOHN 2048 OPERC DR.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: ( ) Change ( ) Addition Name: Address:	TORS
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic Signature of Registered Ager S AND DIRECTORS:  DP ( ) Delete ROMANO, JOHN 2048 OPERC DR. WINDERMERE, FL 34786  DV ( ) Delete CROSS, ALAN 2034 OPERC DR.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: DV (X) Change ( ) Addition Name: MYERS, RICHARD Address: 2114 OPERC DR.	TORS
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	Electronic Signature of Registered Ager  S AND DIRECTORS:  DP () Delete ROMANO, JOHN 2048 OPERC DR. WINDERMERE, FL 34786  DV () Delete CROSS, ALAN 2034 OPERC DR. WINDERMERE, FL 34786  DV () Delete AMERSON, JOSEPH 2042 OPERC DR	ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: DV (X) Change ( ) Addition Name: MYERS, RICHARD Address: 2114 OPERC DR. City-St-Zip: WINDERMERE, FL 34786  Title: ( ) Change ( ) Addition Name: Address:	TORS

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: JOHN ROMANO DP 05/06/2007