

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005147

FILED  
Jul 10, 2008  
Secretary of State

**Entity Name:** CENTRAL FLORIDA FIGURE SKATING ASSOCIATION, INC.

**Current Principal Place of Business:**

8701 MAITLAND SUMMITT BOULEVARD  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 940725  
MAITLAND, FL 32794

**New Mailing Address:**

**FEI Number:** 59-3535968      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

WALKER, BERRY J JR ESQ  
235 S MAITLAND AVENUE  
SUITE 216  
MAITLAND, FL 32751 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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HAYES, BARBARA PD  
Address: 2890 DOE RUN TRAIL  
City-St-Zip: ORANGE CITY, FL 32763

Title: VD ( ) Delete  
Name: BARRET T, ADRIENNE VD  
Address: 2975 LINDALE AVE  
City-St-Zip: ORLANDO, FL 32814

Title: TD ( ) Delete  
Name: HAKIM, HANA TD  
Address: 9319 TIBET POINTE CIRCLE  
City-St-Zip: WINDERMERE, FL 34786

Title: SD ( ) Delete  
Name: DEANGELO, PAM SD  
Address: 5035 PINELAND LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: BM ( ) Delete  
Name: PUCCIO, LENI BM  
Address: 302 RIVERBEND BLVD.  
City-St-Zip: LONGWOOD, FL 32779

Title: BM ( ) Delete  
Name: LAURA, KIRCHNER BM  
Address: 414 WOLDUNN CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BARRETT, ADRIENNE PD  
Address: 2975 LINDALE AVE  
City-St-Zip: ORLANDO, FL 32814

Title: VD (X) Change ( ) Addition  
Name: KIRCHNER, LAURA VD  
Address: 414 WOLDUNN CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

Title: TD (X) Change ( ) Addition  
Name: FAULK, STACEY TD  
Address: 633 BUOY LANE #301  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: BM (X) Change ( ) Addition  
Name: HAYES, BARBARA BM  
Address: 2890 DOE RUN TRAIL  
City-St-Zip: ORANGE CITY, FL 32763

Title: SC (X) Change ( ) Addition  
Name: LECK, JOYCE SC  
Address: 2975 LINDALE AVE  
City-St-Zip: ORLANDO, FL 32814

Title: BM (X) Change ( ) Addition  
Name: KORY, LORI BM  
Address: 14127 FURMAN AVE  
City-St-Zip: ORLANDO, FL 32826

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: ADRIENNE BARRETT

PD

07/10/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date