## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000005913

FILED Jan 17, 2007 Secretary of State

Entity Name: GREATER ORLANDO LIMOUSINE ASSOCIATION, INC

**Current Principal Place of Business: New Principal Place of Business:** 4101 LINDY CIRCLE SUITE #8 ORLANDO, FL 32827 **New Mailing Address: Current Mailing Address:** P O BOX 621871 P O BOX 621871 ORLANDO, FL 328621871 ORLANDO, FL 32862 FEI Number: 59-3537402 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: CARLSWARD, TIMOTHY P T CARLSWARD, TIMOTHY P T 4101 LINDY CIRCLE 4972 TANGERINE AVENUE SUITE #8 WINTER PARK, FL 32792 US ORLANDO, FL 32827 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: TIMOTHY P. CARLSWARD 01/17/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MCKENZIE, MICHAEL PRES Name: Name: 7344 GROTTO AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: () Delete Title: () Change () Addition WHITE, BARBARA VP Name: Name: Address: P.O. BOX 617556 Address: City-St-Zip: ORLANDO, FL 32861 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition DUGGAN, JENIFER SEC CARLSWARD, TIMOTHY P TR/SEC Name: Name: 4705 SPOTTSWOOD RD 4972 TANGERINE AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: WINTER PARK, FL 32792 Title: ( ) Delete Title: (X) Change ( ) Addition TERRANOVA, RANDY DIR Name: CARLSWARD, TIMOTHY P TREA Name: 4101 LINDY CIRCLE SUITE #8 6313 BORDEAUX CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32827 City-St-Zip: SANFORD, FL 32771 Title: () Delete Title: () Change () Addition BERRY, MICHAEL DIR Name: Name: 9712 S. ORANGE AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: Title: () Delete Title: () Change () Addition MELTCHER, KEVIN DIR Name: Name: Address: 7512 DR. PHILIPS BLVD. SUITE #50187 Address: ORLANDO, FL 32819 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TIMOTHY P. CARLSWARD T/S 01/17/2007