2000 UNIFORM BUSINESS REPORT (UBR)

3/14/00-90091-042-$61.25-$61.25

DOCUMENT # N99000000618

FILED
00 APR 10 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Entity Name

ASOCIACION CIVICO-SOCIAL PANAMENA FLORIDA CENTRA

Principal Place of Business	Mailing Address
P O BOX 678284 ORLANDO FL 32867-8284	P O BOX 678284 ORLANDO FL 32867-8284

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3584968 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ARMIEN, RAFAEL — President 1550 BROOKEBRIDGE DR — Director ORLANDO FL 32825	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Jeronimo Cuthbert - Vice-President 105 N. Aberdeen Circle — Director Sanford, FL 32773	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition Elsy Samson — Miss Panama Director 1421 Brookebridge DR. ORLANDO, FL 32825
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Hilda Boreland 3121 Pell Mell DR. Orlando, FL 32818	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition JOSÉ F. SANTAMARIA - Assistant Public Relation 4925 Red BAY DR. ORLANDO FL 32829
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Verónica Matías — Treasurer 1208 Twin Rivers Blvd. — Director Oviedo, FL 32766	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition Ildaura D. Boreland — Secretary 3121 Pell Mell Dr. — Director Orlando, Fl 32818
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Roberto Armien - Assistant Treasurer 729 Sandpiper Ln. Casselberry FL 32707	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Victor Michel (Duplicate)	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition VICTOR MICHEL - Public Relation 10430 CEDARHURST AVE ORLANDO, FL 32825
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Casey Samson - Divulgation/Ads 1421 BrookeBridge DR ORlando, FL 32825	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition KE

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Verónica Matías REQUIRED Verónica Matías 3/06/00 407-365-4457
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #