2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2012
Secretary of State

DOCUMENT# N99000006571

Entity Name: ORPHANS OF THE ARMED FORCES, INC.

Current Principal Place of Business:

2640 LAZY ACRE ROAD
MASCOTTE, FL 34753

New Principal Place of Business:

Current Mailing Address:

2640 LAZY ACRE ROAD
MASCOTTE, FL 34753

New Mailing Address:

FEI Number: 59-3613576 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WITSMAN, EZRA R
138 EAST CENTRAL AVE.
HOWEY-IN-THE-HILLS, FL 34737 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: PD
Name: RICHARDSON, JAMES LEROY
Address: 2640 LAZY ACRE ROAD
City-St-Zip: MASCOTTE, FL 34753

Title: D
Name: DANIELS, JERRY
Address: 7926 BAY LAKE RD.
City-St-Zip: MASCOTTE, FL 34753

Title: VPD
Name: RICHARDSON, TONI
Address: 2640 LAZY ARCE ROAD
City-St-Zip: MASCOTTE, FL 34753

Title: D
Name: RICHARDSON, CALVIN
Address: 1084 RISTERSTOWN RD
City-St-Zip: OWINGS MILLS, MD 21117

I hereby 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 all other like empowered.

SIGNATURE: JAMES LEROY RICHARDSON PD 04/29/2012

Electronic Signature of Signing Officer or Director Date