

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000096906

FILED
Jan 29, 2009
Secretary of State

Entity Name: ORLANDO CULINARY ACADEMY, INC.

Current Principal Place of Business:

2895 GREENSPPOINT PKWY, #600
ATTN: TAX DEPT
HOFFMAN ESTATES, IL 60169

New Principal Place of Business:

Current Mailing Address:

2895 GREENSPPOINT PKWY
SUITE 600, ATTN: TAX DEPT.
HOFFMAN ESTATES, IL 60169

New Mailing Address:

FEI Number: 36-4476023 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

| | | |
|--------------|-----------------------------------|------------|
| Title: | CEO | () Delete |
| Name: | MCCULLOUGH, GARY E | |
| Address: | 2895 GREENSPPOINT PKWY, STE 600 | |
| City-St-Zip: | HOFFMAN ESTATES, IL 60169 US | |
| | | |
| Title: | ASCT | () Delete |
| Name: | ZILCH, KENNETH R | |
| Address: | 2895 GREENSPPOINT PKWY, STE 600 | |
| City-St-Zip: | HOFFMAN ESTATES, IL 60169 US | |
| | | |
| Title: | CFO | () Delete |
| Name: | GRAHAM, MICHAEL J | |
| Address: | 2895 GREENSPPOINT PKWY, STE 600 | |
| City-St-Zip: | HOFFMAN ESTATES, IL 60169 US | |
| | | |
| Title: | VP | () Delete |
| Name: | GRAHAM, MICHAEL J | |
| Address: | 2895 GREENSPPOINT PKWY, SUITE 600 | |
| City-St-Zip: | HOFFMAN ESTATES, IL 60169 US | |
| | | |
| Title: | TREA | () Delete |
| Name: | FRIESEN, JASON T | |
| Address: | 2895 GREENSPPOINT PKWY, SUITE 600 | |
| City-St-Zip: | HOFFMAN ESTATES, IL 60169 US | |
| | | |
| Title: | SECR | () Delete |
| Name: | RAGO, GAIL B | |
| Address: | 2895 GREENSPPOINT PKWY, SUITE 600 | |
| City-St-Zip: | HOFFMAN ESTATES, IL 60169 US | |

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

| | |
|--------------|-------------------------|
| Title: | () Change () Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| | |
| Title: | () Change () Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| | |
| Title: | () Change () Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| | |
| Title: | () Change () Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH R. ZILCH

ASCT

01/29/2009

Electronic Signature of Signing Officer or Director

_____ Date