

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006362

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: ORGANIZING FOR RESULTS, INC.

## Current Principal Place of Business:

5288 BROOK CT  
ORLANDO, FL 32811

## New Principal Place of Business:

## Current Mailing Address:

7512 DR PHILLIP'S BLVD  
STE 50 PMB 311  
ORLANDO, FL 32819

## New Mailing Address:

FEI Number: 31-1816482      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NUNN, MARY  
5288 BROOK CT  
ORLANDO, FL 32811      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: PD ( ) Delete  
Name: NUNN, MARY  
Address: 5288 BROOK CT  
City-St-Zip: ORLANDO, FL 32811

Title: VP ( ) Delete  
Name: HOWES, AMELIA W  
Address: 801 CRESTED BUTTE TRAIL  
City-St-Zip: FLOWER MOUND, TX 75028

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARY NUNN

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01/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date