

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067134

Entity Name: 1ST ORLANDO MANAGEMENT.INC

FILED
Jan 14, 2005
Secretary of State

Current Principal Place of Business:

4630 S. KIRKMAN RD.
SUITE #169
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

4630 S. KIRKMAN RD.
SUITE #169
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALABRESE, GINA M
4630 S.KIRKMAN RD
SUITE#169
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

CALABRESE, MATTHEW
4630 S.KIRKMAN RD
SUITE#169
ORLANDO, FL 32819 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: MATTHEW CALABRESE

01/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CALABRESE, GINA M
Address: 4630 S. KIRKMAN RD.
City-St-Zip: ORLANDO, FL 32819 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CALABRESE, MATTHEW
Address: 4630 S. KIRKMAN RD.
City-St-Zip: ORLANDO, FL 32819 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MATTHEW CALABRESE

P

01/14/2005

Electronic Signature of Signing Officer or Director

Date