

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000145732

FILED
Feb 18, 2009
Secretary of State

Entity Name: ORANGE AVENUE BUSINESS ASSOCIATION, INC.

Current Principal Place of Business:

919 ORANGE AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

919 ORANGE AVENUE
100
WINTER PARK, FL 32789

Current Mailing Address:

1192 ORANGE AVENUE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 20-3785914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: HENLEY, STEPHANIE
Address: 919 ORANGE AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: S (X) Delete
Name: SERROS, JOAN
Address: 919 ORANGE AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: T () Delete
Name: YATES, CHRISTOPHER
Address: 1192 ORANGE AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: PARKER, ALAN
Address: 919 ORANGE AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: D (X) Delete
Name: MAROON, WILLIAM
Address: 919 ORANGE AVENUE
City-St-Zip: WINTER PARK, FL 32789

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:

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: STEPHANIE HENLEY

PD

02/18/2009

Electronic Signature of Signing Officer or Director

Date