

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001420

Entity Name: I LONGGO ASSOCIATION OF CENTRAL FLORIDA INC.**Current Principal Place of Business:**488 AUTUMN DAMASK CT.
OCOE, FL 34761**Current Mailing Address:**488 AUTUMN DAMASK CT.
OCOE, FL 34761 US**FEI Number: 26-1952796****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**O'MEARA, JEANETTE
488 AUTUMN DAMASK CT.
OCOE, FL 34761 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P	Title	VP
Name	O'MEARA, JEANETTE	Name	DERAYUNAN, PORFERIO
Address	488 AUTUMN DAMASK CT.	Address	2802 LAZLO LN.
City-State-Zip:	OCOE FL 34761	City-State-Zip:	ORLANDO FL 32837
Title	S	Title	T
Name	ALDAY, JOYCE	Name	DERAYUNAN, MARVIE
Address	2113 POLO CLUB DR APT 102	Address	2802 LAZLO LN.
City-State-Zip:	KISSIMMEE FL 34741	City-State-Zip:	ORLANDO FL 32837
Title	PR	Title	A
Name	ANTEQUINO, ROSIE	Name	CONFESOR, FRED
Address	2401 CHRISTAMMY CT	Address	8167 BLUESTAR CIRCLE
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32819

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: JEANETTE O'MEARA**P****03/31/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date