## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007599

Entity Name: AUTISM SOCIETY OF GREATER ORLANDO, INC.

FILED
Jan 08, 2017
Secretary of State
CC0529137326

## **Current Principal Place of Business:**

1650 SAND LAKE ROAD SUITE 235 ORLANDO, FL 32809

## **Current Mailing Address:**

1650 SAND LAKE ROAD SUITE 235 ORLANDO, FL 32809 US

FEI Number: 59-3407128 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LORMAN, DONNA 1650 SAND LAKE ROAD SUITE 235 ORLANDO, FL 32809 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

Officer/Director Detail:

Title P Title VF

NameLORMAN, DONNANameDISTEFANO-WALKER, JULIEAddress4743 HEARTHSIDE DRIVEAddress1790 EAST GRAVES AVENUECity-State-Zip:ORLANDO FL 32837City-State-Zip:ORANGE CITY FL 32763

Title TRES Title SEC

Name TAYLOR, ANGELICA Name CLAY, JESSICA

Address 6811 TANGLEWOOD BAY DRIVE Address 12987 MALLORY CIRCLE

APT 2507 APT 202

City-State-Zip: ORLANDO FL 32821 City-State-Zip: ORLANDO FL 32828

Title VP

Name NOLL, REBECCA

Address 33215 COVENTRY DRIVE City-State-Zip: LEESBURG FL 34788

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: DONNA LORMAN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/08/2017

Date