

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 05, 2018
Secretary of State
CC0848613720

Entity Name: RECOVER ORLANDO, INCORPORATED

Current Principal Place of Business:

1400 N. NOWELL STREET
ORLANDO, FL 32808

Current Mailing Address:

1400 N. NOWELL STREET
ORLANDO, FL 32808 US

FEI Number: 45-3092936

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACQUES, DAVID S
1400 N. NOWELL STREET
ORLANDO, FL 32808 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/D
Name JACQUES, DAVID S
Address 1400 N. NOWELL STREET
City-State-Zip: ORLANDO FL 32808

Title VP/D
Name JACQUES, KAREN
Address 1400 N. NOWELL STREET
City-State-Zip: ORLANDO FL 32808

Title D
Name FRYAR, ANITA
Address 14037 EYLEWOOD
City-State-Zip: WINTER GARDEN FL 34787

Title D
Name ABRAHAM, SAMUEL
Address 9927 WATER FERN CIRCLE
City-State-Zip: CLERMONT FL 34711

Title D
Name DECAUL, BRIAN
Address 814 MIAMI SPRINGS DRIVE
City-State-Zip: LONGWOOD FL 32779

Title D
Name ROBINSON, VALERIE
Address 1330 BLACK WILLOW TRAIL
City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: DAVID JACQUES

REGISTERED AGENT

03/05/2018

Electronic Signature of Signing Officer/Director Detail

Date