2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003974

Entity Name: ORLANDO AFTER-SCHOOL ALL-STARS, INC.

FILED
Apr 25, 2019
Secretary of State
4029326272CC

Current Principal Place of Business:

595 N PRIMROSE DR ORLANDO, FL 32803

Current Mailing Address:

595 N PRIMROSE DR ORLANDO, FL 32803 US

FEI Number: 59-3313614 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CALLAN, THOMAS P 921 BRADSHAW TERRACE ORLANDO, FL 32806 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: THOMAS P. CALLAN 04/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DS Title DIRECTOR

Name DOWLESS, DONNA Name CALLAN, THOMAS P

Address 1055 LANCASTER DRIVE Address 921 BRADSHAW TERRACE

City-State-Zip: ORLANDO FL 32806 City-State-Zip: ORLANDO FL 32806

Title CEO Title CHAIRMAN

Name TYLER, CHANDLER Name ARROW, COLBY

Address 400 S. ORANGE AVE. Address 850 CONCOURSE PARKWAY S

SUITE 200

DIRECTOR

City-State-Zip: ORLANDO FL 32801 City-State-Zip: MAITLAND FL 32751

Title DIRECTOR Title

Name EARLY, LISA Name WATSON, KIM

Address 595 N PRIMROSE DR Address 8256 EXCHANGE DR

City-State-Zip: ORLANDO FL 32803 SUITE 210

City-State-Zip: ORLANDO FL 32809

Title DIRECTOR

Name JENKINS, BARBARA Title DIRECTOR

Address 445 W AMELIA ST Name KITTINGER, FRED
City-State-Zip: ORLANDO FL 32801 Address P.O. BOX 160040

City-State-Zip: ORLANDO FL 32816

Continues on page 2

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: TYLER CHANDLER EXECUTIVE DIRECTOR 04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

City-State-Zip:

ORLANDO FL 32801

Title **DIRECTOR** Title DIRECTOR Name MCREYNOLDS, JOHN Name KEFAUVER, JOE Address 1000 UNIVERSAL STUDIOS Address 1030 N ORANGE AVE City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32819

TitleDIRECTORTitleDIRECTOR, TREASURERNameORTIZ, TONYNamePRANIEWICZ, KIM

Address 400 S ORANGE AVE, 2ND FL Address 200 E ROBINSON ST. 10TH FLOOR

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR Title DIRECTOR

Name YEAGER, ROBERT Name KOLODINSKY, CHRIS

Address 130 S ORANGE AVE Address 8701 MAITLAND SUMMIT BLVD

SUITE 300 City-State-Zip: ORLANDO FL 32810 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name DRYDEN, GREG

Name BULLOCK, CLINTON Address 200 E ROBINSON ST

Address 6003 PERSHING AVENUE SUITE 900

City-State-Zip: ORLANDO FL 32822 City-State-Zip: ORLANDO FL 32801

TitleDIRECTORTitleDIRECTORNameFABER, AUSTINNameFABER, ERIC

Address 1000 LEGION PLACE Address 1401 W FAIRBANKS AVE

SUITE 750 SUITE 202

City-State-Zip: ORLANDO FL 32801 City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR Title DIRECTOR

Name MARTIN GENE Name ROLON, ORLANDO

Name MARTIN, GENE Name ROLON, ORLANDO

Address 8701 MAITLAND SUMMIT BLVD Address 1250 W SOUTH ST

City-State-Zip: ORLANDO FL 32810 City-State-Zip: ORLANDO FL 32805

Title DIRECTOR Title COO

Name SMITH, BRIAN Name TOFFOLI, DANIEL

Address 200 S ORANGE AVE Address 3179 OPEN MEADOW LOOP

SUITE 2300 City-State-Zip: OVIEDO FL 32766