## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 747624**

FILED Apr 22, 2004 Secretary of State

Entity Name: SOUTH FLORIDA CENTER FOR FINANCIAL TRAINING, INC. (SFCFT)

Current Principal Place of Business: New Principal Place of Business:

ROOM 3704-10

MIAMI, FL 33132 US

Current Mailing Address: New Mailing Address:

245 NE 4TH ST ROOM 3704-10 MIAMI, FL 33132 US

FEI Number: 59-1293887 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAGUNA, CONNIE 245 NE 4TH ST ROOM 3704-10 MIAMI, FL 33132 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:

City-St-Zip:

Address:

Flacture Company of Davidson d Asset

City-St-Zip:

Address:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

MIAMI, FL 33131

2701 S. BAYSHORE DRIVE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CORAL GABLES, FL 33134

2701 S. BAYSHORE DRIVE

Title: CD ( ) Delete Title: D (X) Change ( ) Addition Name: HICKS, BETH PARTNER

Address: 200 S. BISCAYNE BLVD., STE 4450 Address: 200 S. BISCAYNE BLVD., STE 4450

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: M ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LAGUNA, CONNIE,
 Name:

 Address:
 300 NE 2ND AVE
 Address:

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 LOPEZ, ROBERT
 Name:
 REES, CHERYL SVP

 Address:
 200 S BISCAYNE BLVD
 Address:
 2800 PONCE DE LEON BLVD

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 CORAL GABLES,, FL 33134

Title: PD () Delete Title: PD (X) Change () Addition
Name: ADLER, KURT Name: MOYNAHAN, STEPHEN CCO
Address: 700 BRICKELL AVENUE Address: 121 ALHAMBRA CIRCLE

Title: D () Delete Title: CD (X) Change () Addition

 Name:
 MOYNAHAN, STEPHEN SVP/CCO
 Name:
 ADLER, KURT SHRO

 Address:
 121 ALHAMBRA CIRCLE, PH1
 Address:
 700 BRICKELL AVENUE

 City-St-Zip:
 CORAL GABLE, FL 33134
 City-St-Zip:
 MIAMI, FL 33131

Title: D ( ) Delete Title: TD (X) Change ( ) Addition Name: EGGLAND, DANIEL PRES. Name: EGGLAND, DANIEL PRES.

City-St-Zip: MIAMI, FL 33133 City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CONNIE LAGUNA M 04/22/2004