

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764714

FILED
Aug 03, 2009
Secretary of State

Entity Name: SMPS FLORIDA CHAPTER, INC.

Current Principal Place of Business:

940 N. FERNCREEK AVENUE
ORLANDO, FL 32803 US

New Principal Place of Business:

255 SOUTH MAITLAND AVENUE
MAITLAND, FL 32751 US

Current Mailing Address:

P.O. BOX 1459
ORLANDO, FL 32801 US

New Mailing Address:

FEI Number: 59-2648921 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BONILLA, BRENDA
940 N. FERNCREEK AVENUE
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

WRIGHT, MELANNIE
300 PRIMERA BOULEVARD
SUITE 200
LAKE MARY, FL 32746 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: MELANNIE WRIGHT

08/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RANDOLPH, BILL
Address: P.O. BOX 941994
City-St-Zip: MAITLAND, FL 32794

Title: VP () Delete
Name: RANDOLPH, BILL
Address: PO BOX 941994
City-St-Zip: MAITLAND, FL 32794

Title: VP () Delete
Name: HOLLINGSWORTH, LINDA
Address: 255 SOUTH MAITLAND AVE.
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: KEENE, KAREN
Address: 630 NORTH WYMORE ROAD SUITE 370
City-St-Zip: MAITLAND, FL 32751

Title: TR () Delete
Name: BONILLA, BRENDA
Address: 940 N. FERNCREEK AVE
City-St-Zip: ORLANDO, FL 32803

Title: D (X) Delete
Name: PETERSON, KAREN
Address: 1912 BOOTHE CIRCLE, SUITE 100
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOLLINGSWORTH, LINDA
Address: 255 SOUTH MAITLAND AVENUE
City-St-Zip: MAITLAND, FL 32751

Title: VP (X) Change () Addition
Name: KLAPROTH, KATY
Address: 1900 SUMMIT TOWER BLVD., SUITE 150
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change () Addition
Name: CRAPPS, ROSALIND
Address: 255 SOUTH ORANGE AVENUE, SUITE 1600
City-St-Zip: ORLANDO, FL 32801

Title: TR (X) Change () Addition
Name: WRIGHT, MELANNIE
Address: 300 PRIMERA BOULEVARD, SUITE 200
City-St-Zip: LAKE MARY, FL 32746

Title: D (X) Change () Addition
Name: PETERSON, KAREN
Address: 1912 BOOTHE CIRCLE, SUITE 100
City-St-Zip: LONGWOOD, FL 32750

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MELANNIE WRIGHT

TR

08/03/2009

Electronic Signature of Signing Officer or Director

Date