2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#764714

FILED Jan 05, 2010 Secretary of State

Entity Name: SMPS FLORIDA CHAPTER, INC.

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

255 SOUTH MAITLAND AVENUE 1900 SUMMIT TOWER BLVD. MAITLAND, FL 32751 US

SUITE 150

ORLANDO, FL 32810

Current Mailing Address: New Mailing Address:

P.O. BOX 1459 P.O. BOX 1459

ORLANDO, FL 32801 US ORLANDO, FL 32802 US

FEI Number: 59-2648921 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:

WRIGHT, MELANNIE KLAPROTH, KATY 300 PRIMERA BOULEVARD 1900 SUMMIT TOWER BLVD. SUITE 200 SUITE 150 LAKE MARY, FL 32746 US ORLANDO, FL 32810 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: KATY KLAPROTH 01/05/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

KLAPROTH, KATY Name:

Address: 1900 SUMMIT TOWER BLVD., SUITE 150

City-St-Zip: ORLANDO, FL 32810

Title:

Name: CRAPPS, ROSALIND

Address: 255 SOUTH ORANGE AVENUE, SUITE 1600

City-St-Zip: ORLANDO, FL 32801

Title:

PETERSEN, KAREN Name:

1912 BOOTH CIRCLE, SUITE 100 Address: City-St-Zip: LONGWOOD, FL 32750 US

Title:

Name: STILES, BARBARA

5750 MAJOR BLVD., SUITE 400 Address: City-St-Zip: ORLANDO, FL 32819 US

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: BARBARA STILES T 01/05/2010