

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001453

FILED
Apr 30, 2010
Secretary of State

Entity Name: TURNAROUND MANAGEMENT ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

C/O BANKERS ADVOCATE GROUP
2807 EAST COMMUNITY DRIVE
JUPITER, FL 33458 US

New Principal Place of Business:

C/O MESIROW FINANCIAL
2 SOUTH BISCAYNE BOULEVARD
MIAMI, FL 33131 US

Current Mailing Address:

C/O BANKERS ADVOCATE GROUP
PO BOX 9228
JUPITER, FL 33468 US

New Mailing Address:

TURNAROUND MANAGEMEN ASSOC. OF FLORIDA
P.O. BOX 460939
FORT LAUDERDALE, FL 33346 US

FEI Number: 65-1089785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARNOLD, MATHENY & EAGAN, P.A.
605 EAST ROBINSON STREET
SUITE 730
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

SMITH, SUSAN
2 SOUTH BISCAYNE BOULEVARD
MIAMI, FL 33131 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: SUSAN SMITH

04/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SMITH, SUSAN A
Address: P.O. BOX 460939
City-St-Zip: FORT LAUDERDALE, FL 33346 US

Title: VP
Name: BAUCK, LYLE
Address: P.O. BOX 460939
City-St-Zip: FORT LAUDERDALE, FL 33346 US

Title: T
Name: MARSHALL, ADAM
Address: P.O. BOX 460939
City-St-Zip: FORT LAUDERDALE, FL 33346 US

Title: VP
Name: FULTZ, CHARLES
Address: P.O. BOX 460939
City-St-Zip: FORT LAUDERDALE, FL 33346 US

Title: VP
Name: RAMASSAR, PORTIA
Address: P.O. BOX 460939
City-St-Zip: FORT LAUDERDALE, FL 33346 US

Title: VP
Name: WELKER, ROGER
Address: P.O. BOX 460939
City-St-Zip: FORT LAUDERDALE, FL 33346 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: LYLE BAUCK

VP

04/30/2010

Electronic Signature of Signing Officer or Director

Date