## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000002720

Entity Name: FLORIDA CHAPTER OF AFCC, INC.

FILED Jan 23, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4501 TAMIAMI TR. N. #200 NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

4501 TAMIAMI TR N. #200 NAPLES, FL 34103

FEI Number: 65-1101147 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:

MATHESON, ROBERT 4501 TAMIAMI TR N. #200 NAPLES, FL 34103 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:

Flateria Gianatas of Davidson I Associ

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition Name: STARNES, HUGH Name: FIELDSTONE, LINDA Address: 1700 MONROE ST Address: 175 NW 1ST AV

 City-St-Zip:
 FORT MYERS, FL 33901
 City-St-Zip:
 MIAMI, FL 33128

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

 Name:
 CARTER, DEBRA
 Name:
 BLANTON, NANCY

 Address:
 2737 WEST FAIRBANKS AV
 Address:
 PO BOX 2995

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:
 LAKE CITY, FL 32025

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

 Name:
 FIELDSTONE, LINDA M ED
 Name:
 CARTER, DEBORAH

 Address:
 1175 NW 1ST AVE
 Address:
 6016-26TH ST. #2

 City-St-Zip:
 MIAMI, FL 33128
 City-St-Zip:
 BRADINGTON, FL 34209

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCGOWAN, MERCEDES PHD
 Name:

 Address:
 482 JACKSONVILLE DR
 Address:

 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 MATHESON, ROBERT CPA
 Name:

 Address:
 4501 TAMIAMI TR N #200
 Address:

 City-St-Zip:
 NAPLES, FL 34103
 City-St-Zip:

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: ROBERT MATHESON TRES 01/23/2005