

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000437

FILED
Mar 29, 2011
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS, INC.

Current Principal Place of Business:

222 S. WESTMONTE DR., #101
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

222 S. WESTMONTE DR., #101
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 30-0151358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAUTTER, MARTINE E
222 S. WESTMONTE DR., #101
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: IPPD
Name: SPYKER, TAMARA K
Address: 6605 HERITAGE LANE
City-St-Zip: BRADENTON, FL 34209

Title: PD
Name: EDRICH, MELISSA W
Address: 6100 GRIFFIN RD
City-St-Zip: DAVIE, FL 33314

Title: PETD
Name: WILLIAMS, RACHEL M
Address: 6100 GRIFFIN RD
City-St-Zip: DAVIE, FL 33314

Title: ED
Name: KAUTTER, MARTINE E
Address: 222 S WESTMONTE DR STE 101
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: MARTINE E KAUTTER

ED

03/29/2011

Electronic Signature of Signing Officer or Director

Date