## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000005214

Jan 21, 2<u>0</u>08 Secretary of State

Entity Name: ASSOCIATION OF CORPORATE COUNSEL AMERICA SOUTH FLORIDA CHAPTER INC.

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

20423 STATE ROAD 7, SUITE F6-491 BOCA RATON, FL 33498

**Current Mailing Address: New Mailing Address:** 

20423 STATE ROAD 7, SUITE F6-491 BOCA RATON, FL 33498

FEI Number: 20-0048136 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:

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410

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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition VILLASANA, GEORGE SIBNER, STEVEN Name: Name:

20423 STATE ROAD 7, SUITE F6-491 Address: 20423 STATE ROAD 7, SUITE F6-491 Address:

City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOCA RATON, FL 33498

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

SIBNER, STEVEN Name: KETT, EILEEN Name:

Address: 20423 STATE ROAD 7. SUITE F6-491 Address: 20423 STATE ROAD 7. SUITE F6-491

City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOCA RATON, FL 33498

Title: () Delete Title: (X) Change ( ) Addition PERRY, FREDERICK IRIZARRY-LOPEZ, CARMEN Name: Name:

20423 STATE ROAD 7, SUITE F6-491 20423 STATE ROAD 7, SUITE F6-491 Address: Address:

City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOCA RATON, FL 33498

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

Name: ROTHSTEIN, LAZARUS Name: POWELL, ROBERT 20423 STATE ROAD 7, SUITE F6-491 Address: 20423 STATE ROAD 7, SUITE F6-491 Address:

City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOCA RATON, FL 33498

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: JODY B. ROSEN ED 01/21/2008