03 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2003 8:00 am
Secretary of State
08-11-2003 90283 023 ****61.25

DOCUMENT # N20926

1. Entity Name

NORTHEAST FLORIDA CHAPTER, AMERICAN SOCIETY FOR TRAINING AND DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
3020 HARTLEY RD STE 300 JACKSONVILLE FL 32257	3020 HARTLEY RD STE 300 JACKSONVILLE FL 32257

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 51-0222908 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARTIN, MICHAEL 3020 HARTLEY RD STE 300 JACKSONVILLE FL 32257	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DIRECTOR	☐ Delete	TITLE	VICE-PRESIDENT/DIR.	☐ Change ☑ Addition
NAME	BOROWIEC, STEVEN		NAME	ANNE ANTONIOU	
STREET ADDRESS	1200 ALUMNI DR.		STREET ADDRESS	800 WATER STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32224-2645		CITY-ST-ZIP	JACKSONVILLE, FL 32231	
TITLE	PAST PRESIDENT	☐ Delete	TITLE	VICE PRESIDENT/DIR.	☐ Change ☑ Addition
NAME	ORR-HOLLEY, LYNNE		NAME	KAREN DAWKINS	
STREET ADDRESS	226-5 SOLANA RD PMB 102		STREET ADDRESS	800 WATER STREET	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		CITY-ST-ZIP	JACKSONVILLE, FL 32231	
TITLE	~~00~~ PRESIDENT	☐ Delete	TITLE	VICE PRESIDENT/DIR.	☐ Change ☐ Addition
NAME	MARTIN, MICHAEL		NAME	CYNTHIA FORMAN	
STREET ADDRESS	3020 HARTLEY RD., STE 3000		STREET ADDRESS	8938 CHAMBORD DR.	
CITY-ST-ZIP	JACKSONVILLE FL 32257		CITY-ST-ZIP	JACKSONVILLE, FL 32256	
TITLE	SECRETARY	☐ Delete	TITLE	VICE PRESIDENT/DIR.	☐ Change ☑ Addition
NAME	GRAF, ISABEL		NAME	DAGMAR TENZER	
STREET ADDRESS	500 WATER ST J 400		STREET ADDRESS	2346 GLADE SPRINGS DR. #1	
CITY-ST-ZIP	JACKSONVILLE FL 32202		CITY-ST-ZIP	JACKSONVILLE, FL 32246	
TITLE	D	☑ Delete	TITLE	VICE PRESIDENT/DIR.	☐ Change ☑ Addition
NAME	BLACKMER, GREG		NAME	TANYA COOMES	
STREET ADDRESS	1025 KINGS RD		STREET ADDRESS	3354 OPEN CREEK CT.	
CITY-ST-ZIP	NEPTUNE BCH FL 32266		CITY-ST-ZIP	JACKSONVILLE, FL 32224	
TITLE	D	☑ Delete	TITLE	VICE PRESIDENT/DIR.	☐ Change ☑ Addition
NAME	RIDGEWAY, DONNA		NAME	MARILYN FELDSTEIN	
STREET ADDRESS	1000 SHEARER ST		STREET ADDRESS	1547 SILVER OAK LANE	
CITY-ST-ZIP	JACKSONVILLE FL 32205		CITY-ST-ZIP	JACKSONVILLE, FL 32223	

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED MICHAEL L. MARTIN 6/19/03 904-260-6700