FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL -3 AM 10:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N32635 (7)

1. Corporation Name

CENTRAL FLORIDA CHAPTER ASSOCIATION OF LEGAL ADMINISTRATORS, INC.

Principal Place of Business	Mailing Address
225 E. ROBINSON ST. SUITE 450 ORLANDO FL 32801	P.O. BOX 1273 ORLANOD FL 32802

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/01/1989
3a. Date of Last Report: 05/01/1994
4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 28 E. WASHINGTON STREET	26 P.O. BOX 3388
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 ORLANDO, FL	City & State 28 ORLANDO, FL
Zip / Country 24 32801 / 25 USA	Zip / Country 29 32802 / 30 USA

9. Name and Address of Current Registered Agent

HAMILTON, PHILIP THOMAS
225 E. ROBINSON STREET, SUITE 450
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name: FICARRA, HELEN R.
82 Street Address (P.O. Box Number is Not Acceptable): 28 E. WASHINGTON STREET
83
84 City: ORLANDO, FL 85 Zip Code: 32801

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Helen R Ficarra — 4/5/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	P/D	☒ Change ☐ Addition
NAME	HAMILTON, PHILIP THOMAS	12 NAME	FICARRA, HELEN R.	
STREET ADDRESS	225 E. ROBINSON ST. STE 450	13 STREET ADDRESS	28 E. WASHINGTON STREET	
CITY-ST-ZIP	ORLANDO FL 32801	14 CITY-ST-ZIP	ORLANDO FL 32801	
TITLE	VD	21 TITLE	V/D	☒ Change ☐ Addition
NAME	STRAKER, MARIANNE B.	22 NAME	WANGERIN, ELEANOR T.	
STREET ADDRESS	145 E. RICH AVENUE	23 STREET ADDRESS	1000 LEGION PLACE 17TH FLOOR	
CITY-ST-ZIP	DELAND FL 32721-0048	24 CITY-ST-ZIP	ORLANDO, FL 32801	
TITLE	TD	31 TITLE	T/D	☒ Change ☐ Addition
NAME	HANKS, DONALD W.	32 NAME	GREEN, SHARON Y.	
STREET ADDRESS	201 N. MAGNOLIA AVE.	33 STREET ADDRESS	200 S. ORANGE AVENUE, SUITE 2300	
CITY-ST-ZIP	ORLANDO FL 32801	34 CITY-ST-ZIP	ORLANDO, FL 32801	
TITLE	SD	41 TITLE	S/D	☒ Change ☐ Addition
NAME	WANGERIN, ELEANOR T.	42 NAME	BEAUMONT, KAREN L.	
STREET ADDRESS	1000 LEGION PLACE 17TH FLR	43 STREET ADDRESS	20 N. ORANGE AVENUE, SUITE 804	
CITY-ST-ZIP	ORLANDO FL 32801	44 CITY-ST-ZIP	ORLANDO, FL 32801	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE	$ 7/31	☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Karen L. Beaumont / Secretary — 4/6/95 — 407-841-6391
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

003137

CENTRAL FLORIDA CHAPTER
ASSOCIATION OF LEGAL ADMINISTRATORS

June 27, 1995

Ms. Sandra B. Mortham
Secretary of State
Florida Department of State
Division of Corporations

Re: Central Florida Chapter of Association of Legal Administrators "Association"

Dear Ms. Mortham:

Enclosed is the Association's 1995 Corporate Annual Report, along with a check in the amount of $61.25.

In accordance with instructions for Block 7, as a non-profit corporation exempt from Federal tax under S.501(C)(3) of the Internal Revenue Service Code, the Association is not subject to the $68.75 supplemental corporate fee or the $25.00 late fee.

Thank you.

Very truly yours,

Sharon Green

Sharon Green
Treasurer, Central Florida Chapter