

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000183

FILED
Feb 16, 2010
Secretary of State

Entity Name: ACADEMY OF FLORIDA ELDER LAW ATTORNEYS, INC.

Current Principal Place of Business:

2810-C INDUSTRIAL PLAZA DRIVE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 13978
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 65-0281151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABRERA, SUSAN
2810-C INDUSTRIAL PLAZA
TALLAHASSEE, FL 32301 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: IPP
Name: BRYAN, RANDY
Address: 254 PLAZA DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: PE
Name: PRATHER, BETH
Address: 3783 SEAGO LANE
City-St-Zip: FT MYERS, FL 33901

Title: D
Name: HEULER, VICTORIA E
Address: P.O. DRAWER 229
City-St-Zip: TALLAHASSEE, FL 32302

Title: P
Name: MAZZEO, MARK
Address: 4140 WOODMERE PARK, BLVD
City-St-Zip: VENICE, FL 34293

Title: S
Name: QUINNELL, STEVEN
Address: 101 EAST GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32502

Title: ED
Name: CABRERA, SUSAN
Address: PO BOX 13978
City-St-Zip: TALLAHASSEE, FL 32317

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: SUSAN CABRERA

ED

02/16/2010

Electronic Signature of Signing Officer or Director

Date