2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2008
Secretary of State

DOCUMENT# N96000006348

Entity Name: FLORIDA CHAPTER OF THE COLLEGE AND UNIVERSITY PROFESSIONAL ASSOCIATION FOR HUMAN RESOURCES, INC.

Current Principal Place of Business:

ROLLINS COLLGE
1000 HOLT AVE 2718
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

ROLLINS COLLEGE
100 HOLT AVE. 2718
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-3267263 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCREYNOLDS, IRENE
600 S. CLYDE MORRIS BLVD.
HUMAN RESOURCES
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

GOODLETT, KAREN
6200 UNIVERSITY CENTER A
FSU HUMAN RESOURCES
TALLAHASSEE, FL 323062410 US

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: KAREN GOODLETT 07/07/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GOODLETT, KAREN
Address: FSU 6200 UNVIERSITY CENTER
City-St-Zip: TALLAHASSEE, FL 32306 US

Title: PE ( ) Delete
Name: WILLIAMS, JAMES
Address: 2800 UNIVERSITY BLVD.
City-St-Zip: JACKSONVILLE, FL 32306 US

Title: T ( ) Delete
Name: MCREYNOLDS, IRENE
Address: ERAU, 600 S. CLYDE MORRIS BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: S ( ) Delete
Name: LIEBLONG, LINDA
Address: FSU, 6200 UNIVERSITY CENTER
City-St-Zip: TALLAHASSEE, FL 32306 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOODLETT, KAREN
Address: FSU 6200 UNVIERSITY CENTER A
City-St-Zip: TALLAHASSEE, FL 32306 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: LIEBLONG, LINDA
Address: FSU, 6200 UNIVERSITY CENTER A
City-St-Zip: TALLAHASSEE, FL 32306 US

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: KAREN GOODLETT PRES 07/07/2008
Electronic Signature of Signing Officer or Director Date