2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 07, 2008 8:00 am Secretary of State

DOCUMENT # N32635 1. Entity Name CENTRAL FLORIDA CHAPTER ASSOCIATION OF LEGAL ADMINISTRATORS, INC.							07-07-200	8 90003	035 ****61	25
Principal Place 807 WEST MC WINTER PARK	DRSE BLVD	Mailing Address 807 WEST MORSE BLV WINTER PARK, FL 327	7 WEST MORSE BLVD			40109685				
301 E. Suite, Apt.	i	Suite, Apt. #, etc.	Ol East Pine Street Suite, Apt. #, etc.			06302008	Chg-NP		037 (12/06)	
Suite City & State Orland	o, FL	Suite 1400 City & State Orlando, FL			4. FEI Number Applied For 59-2196408 Not Applied be					
Zip 32801	-	Country Zip Country USA 32801 USA		ntry		5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name and Address of Current R					7. Name and	Address of New	Registered	d Agent	
CORAH, MELISSA 807 WEST MORSE BLVD WINTER PARK, FL 32789				Name McFeron, Lenita Street Address (P.O. Box Number is Not Acceptable) 301 E. Pine Street						
				Suite 1400 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 # applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
Filing Fee is \$61.25 Due by September 12, 2008 9. Election Campaign Trust Fund Contribution						\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10.	OFFICERS AND DIRE		11.			ADDITIONS/CHA	WGES TO OFFI	CERS AND		
NAME STREET ADDRESS CITY-ST-ZIP	KING, JOHN R 215 N. EOLA DRIVE					☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD			l	;			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Delete MCFERON, LENITA 301 E. PINE STREET STE 1400 ORLANDO, FL 32801		NAM STRE	TITLE NAME STREET ADDRESS CITY-ST-ZIP		esident/Director			X Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHNEPP, PATRICIA A 108 E. CENTRAL BLVD ORLANDO, FL 32801	HNEPP, PATRICIA A E. CENTRAL BLVD		E Et address -St-Zip		☐ Change			Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			Kim 420	e Presid Novak S. Oran ando, FL	ige Ave,	Suite	□ Change 1200	X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP	Ali 111 Orl	retary/Director			₩ Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

GNATURE:

SIGNATURE AND TYPED A PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

Description

Date

Description

Date

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407-418-6502