

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32635

FILED
Mar 30, 2010
Secretary of State

Entity Name: CENTRAL FLORIDA CHAPTER ASSOCIATION OF LEGAL ADMINISTRATORS, INC.

Current Principal Place of Business:

301 E PINE ST
STE 1400
ORLANDO, FL 32801 US

New Principal Place of Business:

420 S ORANGE AVE
STE 1200
ORLANDO, FL 328013336 US

Current Mailing Address:

301 E PINE ST
STE 1400
ORLANDO, FL 32801 US

New Mailing Address:

420 S ORANGE AVE
STE 1200
ORLANDO, FL 328013336 US

FEI Number: 59-2196408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCFERON, LENITA K
301 E PINE ST
STE 1400
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

NOVAK, KIM
420 S ORANGE AVE
STE 1200
ORLANDO, FL 328013336 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: KIM NOVAK

03/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: NICHOLAOU, CAROLINE
Address: 111 N. ORANGE AVENUE, SUITE 1200
City-St-Zip: ORLANDO, FL 32801

Title: PD
Name: NOVAK, KIM
Address: 420 S ORANGE AVE, STE 1200
City-St-Zip: ORLANDO, FL 328013336

Title: VD
Name: RUBERTI, SUSAN
Address: 215 N EOLA DRIVE
City-St-Zip: ORLANDO, FL 32801

Title: SD
Name: SIMONSON, MARLENE
Address: 315 E ROBINSON ST, STE 5500
City-St-Zip: ORLANDO, FL 32801

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: KIM NOVAK

PD

03/30/2010

Electronic Signature of Signing Officer or Director

Date