2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00266

Entity Name: ORLANDO CHAPTER OF THE AMERICAN INSTITUTE OF

ARCHITECTS INC.

Current Principal Place of Business:

801 N MAGNOLIA AVE, SUITE 109

ORLANDO, FL 32803

Current Mailing Address:

801 N MAGNOLIA AVE, SUITE 109

ORLANDO, FL 32803 US

FEI Number: 59-2721141 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLDENBERG, ALLISON D 801 N MAGNOLIA AVE, **SUITE 109** ORLANDO, FL 32803 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: ALLISON D GOLDENBERG 01/04/2016

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

Title **PRESIDENT** Title OFFICER

STONE, DAVID Name GIBSON, TIMOTHY A Name

Address 300 RED MULBERRY CT. Address 801 N MAGNOLIA AVE,

SUITE 109 City-State-Zip: LONGWOOD FL 32779

ORLANDO FL 32803 City-State-Zip:

VΡ Title Title OFFICER

STENGER, HOLLY Name TALBERT, REBECCA Name

Address 801 N MAGNOLIA AVE, 801 N MAGNOLIA AVE, Address SUITE 109

SUITE 109 ORLANDO FL 32803

City-State-Zip: City-State-Zip: ORLANDO FL 32803

Title **OFFICER** Title OFFICER

Name SANCHEZ DE FUENTES, ALBERTO CLUFF, MICHAEL Name

Address 801 N MAGNOLIA AVE. Address 801 N MAGNOLIA AVE,

SUITE 109 **SUITE 109**

ORLANDO FL 32803 City-State-Zip: ORLANDO FL 32803

Title **OFFICER**

GORDON, DANNY Name Name RIVERA, HERNAN

801 N MAGNOLIA AVE, Address

Address 801 N MAGNOLIA AVE, **SUITE 109**

Title

SUITE 109 ORLANDO FL 32803

City-State-Zip: City-State-Zip: ORLANDO FL 32803

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OFFICER

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.

01/04/2016 CHAPTER DIRECTOR SIGNATURE: ALLISON D GOLDENBERG

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 04, 2016

Secretary of State

CC6219466641

Officer/Director Detail Continued:

Title OFFICER

Name LEYBA, NELSY

Address 801 N MAGNOLIA AVE,

SUITE 109

City-State-Zip: ORLANDO FL 32803

Title PAST PRESIDENT

Name CHATHAM, MICHAEL K

Address 632 BENTLEY LN.

City-State-Zip: MAITLAND FL 32751

Title SECRETARY

Name MACPHEE, ANDREW

Address 801 N MAGNOLIA AVE,

SUITE 109

City-State-Zip: ORLANDO FL 32803

Title DIRECTOR

Name GOLDENBERG , ALLISON D

Address 801 N MAGNOLIA AVE,

SUITE 109

City-State-Zip: ORLANDO FL 32803

Title TREASURER

Name JERONIMO, JOHN

Address 801 N MAGNOLIA AVE, SUITE 109

City-State-Zip: ORLANDO FL 32803