

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000000662

**Entity Name:** PROJECT MANAGEMENT INSTITUTE CENTRAL FLORIDA  
CHAPTER, INC.**FILED**  
**Jan 08, 2015**  
**Secretary of State**  
**CC4092598519****Current Principal Place of Business:**465 S ORANGE AVE  
# 206  
MAITLAND, FL 32751-5634**Current Mailing Address:**P.O. BOX 947567  
MAITLAND, FL 32794**FEI Number: 59-3254324****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MERRITT, MICHELE R  
465 S ORANGE AVE  
# 206  
MAITLAND, FL 32751-5634 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: MICHELE R. MERRITT****01/08/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title VP  
Name MERRITT, MICHELE  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794Title VP  
Name PANG, MICHAEL  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794Title VP  
Name PARSON, CARA  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794Title PRESIDENT  
Name DELACY, DEBORA  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794Title VP  
Name SCHMITZ, ERIC  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794Title PRESIDENT ELECT  
Name GRIFFIN, TIMOTHY  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794Title VPMR  
Name HARRIS, JIM  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794Title VPREC  
Name SIEGEL, DAVID  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794**Continues on page 2**

*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: MICHELE R MERRITT****VP GOVERNANCE****01/08/2015**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name PASETCHNIK, ADAM  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794

Title VP  
Name BRANT, TRAVIS  
Address P.O. BOX 947567  
City-State-Zip: MAITLAND FL 32794