

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06542

**Entity Name:** THE FLORIDA SOCIETY OF ASSOCIATION EXECUTIVES FOUNDATION, INC.

**FILED**  
**Feb 28, 2014**  
**Secretary of State**  
**CC4109054676**

**Current Principal Place of Business:**

2410 MAHAN DR.  
SUITE 2  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

2410 MAHAN DR.  
SUITE 2  
TALLAHASSEE, FL 32308 US

**FEI Number: 59-2485277**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MADIGAN, TERRELL C  
MADIGAN LAW FIRM, P.L.  
215 EAST THARPE STREET  
TALLAHASSEE, FL 32303 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title IMMEDIATE PAST CHAIRMAN  
Name BELL, TIMOTHY A  
Address 4250 OAKHURST CIRCLE EAST  
City-State-Zip: SARASOTA FL 34233

Title CHAIRMAN  
Name AYOTTE, JIM CAE  
Address 3606 MACLAY BLVD., SOUTH SUITE 200  
City-State-Zip: TALLAHASSEE FL 32312

Title CHAIR - ELECT  
Name BOZA-VALLEDOR, DEBORAH M. CIPS, CRB, CRS  
Address 700 S. ROYAL POINCIANA BLVD. #400  
City-State-Zip: MIAMI FL 33166

Title TREASURER  
Name CALDWELL, JAIME ACHE  
Address 1855 GRIFFIN ROAD SUITE A-415  
City-State-Zip: DANIA BEACH FL 33004

*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: JIM AYOTTE**

**CHAIRMAN**

**02/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date