

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23839

Entity Name: ASSOCIATION OF FUND RAISING PROFESSIONALS, INC. BIG BEND CHAPTER**Current Principal Place of Business:**2230 MONAGHAN DR
TALLAHASSEE, FL 32309**Current Mailing Address:**P.O. BOX 4046
TALLAHASSEE, FL 32301 US**FEI Number: 59-2873430****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SCHWARTZ, STEPHANIE
2230 MONAGHAN DR
TALLAHASSEE, FL 32309 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:** STEPHANIE SCHWARTZ**03/07/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	TEAL, KRISTIE
Address	P.O. BOX 4046
City-State-Zip:	TALLAHASSEE FL 32301

Title	SECRETARY
Name	MAYERS, S. CRAIG
Address	P.O. BOX 4046
City-State-Zip:	TALLAHASSEE FL 32301

Title	PRESIDENT
Name	SCHWARTZ, STEPHANIE
Address	PO BOX 4046
City-State-Zip:	TALLAHASSEE FL 32301

Title	TREASURER
Name	BALLAS, NICOLE
Address	P.O. BOX 4046
City-State-Zip:	TALLAHASSEE FL 32301

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: STEPHANIE SCHWARTZ**PRESIDENT****03/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date