### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23839

Entity Name: ASSOCIATION OF FUND RAISING PROFESSIONALS, INC. BIG

**BEND CHAPTER** 

**FILED** Apr 13, 2017 **Secretary of State** CC0792550944

# **Current Principal Place of Business:**

110 N ADAMS

TALLAHASSEE, FL 32301

# **Current Mailing Address:**

P.O. BOX 16442

TALLAHASSEE, FL 32317

FEI Number: 59-2873430 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

DAVIS, JIM 110 N ADAMS STREET TALLAHASSEE, FL 32301 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: JIM DAVIS 04/13/2017

> Electronic Signature of Registered Agent Date

# Officer/Director Detail:

Title **TREASURER** Title **SECRETARY** 

Name DAVIS, JIM Name PODGORSKI, COLETTE

Address P.O. BOX 16442 Address P.O. BOX 16442

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

Title **PRESIDENT** Title **DIRECTOR** Name LINDSAY, HARTMANN Name JEN, ALBAUGH Address P.O. BOX 16442 Address P.O. BOX 16442

City-State-Zip: TALLAHASSEE FL 32317 TALLAHASSEE FL 32317 City-State-Zip:

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.

04/13/2017 SIGNATURE: JIM DAVIS **TREASURER**