

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713060

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** FLORIDA ENVIRONMENTAL HEALTH ASSOCIATION, INC.

**Current Principal Place of Business:**

134 N WEATHERSFIELD AVE  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 160848  
ALTAMONTE SPRINGS, FL 32716 US

**New Mailing Address:**

**FEI Number:** 59-6204888      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CRUZ, SONIA  
134 N WEATHERSFIELD AVE  
ALTAMONTE SPRINGS, FL 32714 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HENRY, CHARLES H RS, MPA  
Address: 2206 67TH STREET WEST  
City-St-Zip: BRADENTON, FL 34209 US

Title: T  
Name: DUFFEK, KIM  
Address: 400 W ROBINSON ST, STE 529E  
City-St-Zip: ORLANDO, FL 32801

Title: PE  
Name: MAY, SHAUN  
Address: 1147 MUIRFIELD WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: PP  
Name: TUCKER-DISNEY, GALE  
Address: 900 UNIVERSITY BLVD. N. # 300  
City-St-Zip: JACKSONVILLE, FL 32211

Title: EX.D  
Name: CRUZ, SONIA PH.D.  
Address: 134 N WEATHERSFIELD AVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP  
Name: MAGLIEVAZ, ROBERT  
Address: 228 CARLTON AVE  
City-St-Zip: DELAND, FL 32720

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: SONIA CRUZ

EX.D

03/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date