

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719072

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** FLORIDA DIETETIC ASSOCIATION FOUNDATION, INC.

**Current Principal Place of Business:**

2834 REMINGTON GREEN CIRCLE  
SUITE 102  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 12608  
TALLAHASSEE, FL 323172608 US

**New Mailing Address:**

**FEI Number:** 59-6155745

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

STAPELL, CHRISTINE  
2834 REMINGTON GREEN CIRCLE  
SUITE 102  
TALLAHASSEE, FL 32308 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: NORRIS, STEPHANIE E  
Address: 1322 ENSENADA DRIVE  
City-St-Zip: ORLANDO, FL 328258300

Title: PR-E  
Name: WRIGHT, LAURI  
Address: 5328 90TH AVE CIRCLE  
City-St-Zip: PARRISH, FL 34219

Title: SEC  
Name: FISHER, HEATHER  
Address: 6600 WAR ADMIRAL TRAIL  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TR  
Name: SMITH, MARY ELLEN  
Address: 8315 139TH ST  
City-St-Zip: SEMINOLE, FL 33776

Title: EXDR  
Name: STAPELL, CHRISTINE  
Address: 2834 REMINGTON GREEN CIRCLE STE 102  
City-St-Zip: TALLAHASSEE, FL 32308

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: CHRISTINE STAPELL

ED

02/06/2012

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

\_\_\_\_\_  
Date