

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749221

FILED
Mar 29, 2010
Secretary of State

Entity Name: LUPUS FOUNDATION OF AMERICA, INC., GREATER FLORIDA CHAPTER

Current Principal Place of Business:

3637 4TH STREET NORTH
STE 390
ST. PETERSBURG, FL 33704 US

New Principal Place of Business:

Current Mailing Address:

3637 4TH STREET NORTH
STE 390
ST. PETERSBURG, FL 33704 US

New Mailing Address:

FEI Number: 59-1950191 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCQUEEN, MARGARET
950 39TH AVE. N.
SAINT PETERSBURG, FL 33703 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: DP
Name: MCQUEEN, MARGARET
Address: 950 39TH AVE. N.
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: DVP
Name: REEVES, FRANCES
Address: 910 S W 112TH STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: D
Name: GARNETT, W. BLANTON
Address: 930 BAYVIEW PLACE N.E.
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: DT
Name: LARUE LARSON, JOYCE
Address: 1926 BRIGHTWATERS BLVD N.E.
City-St-Zip: ST PETERSBURG, FL 33704

Title: D
Name: KOSBOTH, MEGHAVI S
Address: 9211 N. W. 23RD PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: DS
Name: FEARNLEY, SUSAN
Address: 11875 5TH ST. EAST
City-St-Zip: TREASURE ISLAND, FL 33706

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: MICHAEL J. KEEFER

CEO

03/29/2010

Electronic Signature of Signing Officer or Director

Date