

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750291

FILED  
Mar 20, 2007  
Secretary of State

**Entity Name:** THE CENTRAL FLORIDA SECTION OF THE AMERICAN INSTITUTE OF CHEMICAL ENGINEERS, INC.

**Current Principal Place of Business:**

3524 CRAFTSMAN BLVD  
LAKELAND, FL 33803 US

**New Principal Place of Business:**

**Current Mailing Address:**

4798 S FLORIDA AVENUE  
BOX 253  
LAKELAND, FL 33813 US

**New Mailing Address:**

**FEI Number:** 23-7292002      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ANDREW, ROBERT W  
3524 CRAFTSMAN BLVD  
LAKELAND, FL 33803 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: VC/D ( ) Delete  
Name: SISCO, DENNIS  
Address: PO BOX 5228  
City-St-Zip: LAKELAND, FL 33807

Title: T/D ( ) Delete  
Name: ANDREW, ROBERT W  
Address: 7431 HAVENWOOD DR  
City-St-Zip: LAKELAND, FL 33810

Title: C/D ( ) Delete  
Name: CAMERON, DICK  
Address: 4390 HWY 60 W.  
City-St-Zip: BARTOW, FL 33830

Title: D ( ) Delete  
Name: WIGGINS, L. BRUCE  
Address: 227 WOOD HALL DR  
City-St-Zip: MULBERRY, FL 33860

Title: S/D ( ) Delete  
Name: BRYANT, ANASTASIA M  
Address: 1108 S. ALLENDALE AVE  
City-St-Zip: SARASOTA, FL 34237

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: C/D (X) Change ( ) Addition  
Name: SISCO, DENNIS  
Address: PO BOX 5228  
City-St-Zip: LAKELAND, FL 33807

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VC/D (X) Change ( ) Addition  
Name: MIKKOLA, KAREN  
Address: 5000 OLD HWY 37 SOUTH  
City-St-Zip: MULBERRY, FL 33860

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S/D (X) Change ( ) Addition  
Name: FIGUEROA, RENEE D  
Address: 2481 NE COACHMAN RD APT 705  
City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT W ANDREW

T/D

03/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date