

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751361

FILED  
Jun 26, 2009  
Secretary of State

**Entity Name:** PURCHASING MANAGEMENT ASSOCIATION OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

121 MERIWOOD DR  
KISSIMMEE, FL 34743

**New Principal Place of Business:**

**Current Mailing Address:**

PURCHASING MGMT ASSOC.  
P.O. BOX 621416  
ORLANDO, FL 328621416 US

**New Mailing Address:**

**FEI Number:** 59-2603005 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

WAINWRIGHT, ED  
121 MERIWOOD DR  
KISSIMMEE, FL 34743 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: DAT ( ) Delete  
Name: WAINWRIGHT, ED  
Address: 121 MERIWOOD DR  
City-St-Zip: KISSIMMEE, FL 34743

Title: CEO ( ) Delete  
Name: CARPENTER, RON  
Address: 210 TIFFANY COURT  
City-St-Zip: POINCIANA, FL 347582714

Title: EXS ( ) Delete  
Name: GREGORIO, JOSE  
Address: 7567 MEGAN ELISSA AVE  
City-St-Zip: ORLANDO, FL 32819

Title: CFO ( ) Delete  
Name: COLEMAN, ANN M  
Address: 2280 DERBYSHIRE RD  
City-St-Zip: MAITLAND, FL 32751

Title: COO ( ) Delete  
Name: STRAW, RICHARD W  
Address: 318 WHITE OAK DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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

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

Title: CFO (X) Change ( ) Addition  
Name: CARPENTER, RON  
Address: 210 TIFFANY COURT  
City-St-Zip: POINCIANA, FL 347582714

Title: SEC (X) Change ( ) Addition  
Name: APRIL, GALBRAITH  
Address: 5325 JESSAMINE LN  
City-St-Zip: ORLANDO, FL 32839

Title: PRES (X) Change ( ) Addition  
Name: BETTY, J H  
Address: 3795 SEMINOLE DR  
City-St-Zip: ORLANDO, FL 32812

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

I hereby certify that the information supplied with this filing does not qualify 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: ED WAINWRIGHT

DAT

06/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date