2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2010
Secretary of State

DOCUMENT# 757546

Entity Name: FLORIDA HOSPITAL ENGINEERS ASSOCIATION, INC.

Current Principal Place of Business:

553 LAKE AVENUE
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

Current Mailing Address:

553 LAKE AVENUE
PO BOX 150755
ALTAMONTE SPRINGS, FL 327150755 US

New Mailing Address:

FEI Number: 59-3289879 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VITRAY, ALETHEA
553 LAKE AVENUE
ALTAMONTE SPRINGS, FL 32701 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: D
Name: MARSH, S.P.
Address: 5301 SOUTH CONGRESS AVE.
City-St-Zip: ATLANTIS, FL 33462

Title: D
Name: GAVAZZA, DINO
Address: 13001 SOUTHERN BLVD.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: ED
Name: VITRAY, ALETHEA
Address: 553 LAKE AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D
Name: ZURICH, RICHARD
Address: 2100 SE SALERNO ROAD
City-St-Zip: STUART, FL 34997

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: ALETHEA VITRAY ED 03/04/2010

Electronic Signature of Signing Officer or Director Date