

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763319

FILED  
Jan 28, 2009  
Secretary of State

**Entity Name:** FLORIDA NORTH CHAPTER, AMERICAN INSTITUTE OF ARCHITECTS, INC.

**Current Principal Place of Business:**

3300 S.W. ARCHER ROAD  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

4926 N.W. 19TH PLACE  
GAINESVILLE, FL 32605 US

**Current Mailing Address:**

P. O. BOX 1571  
GAINESVILLE, FL 32602 US

**New Mailing Address:**

4926 N.W. 19TH PLACE  
GAINESVILLE, FL 32605 US

**FEI Number:** 59-6139756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BORST, MICHELE Z  
4926 N.W. 19TH PLACE  
GAINESVILLE, FL 32605 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 ( ) Delete  
Name: HANSELMAN, ROBERT W  
Address: 9316 SW 12TH AVE  
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete  
Name: KUENSTLE, MICHAEL W  
Address: 3422 NW 13TH AVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: WARINNER, WILLIAM E  
Address: 306 NE FIFTH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

Title: P ( ) Delete  
Name: CHRISTIAN, CEDRIC  
Address: 3300 SW ARCHER ROAD  
City-St-Zip: GAINESVILLE, FL 32608

Title: VP ( ) Delete  
Name: RICKMAN, PHILIP  
Address: 4328 NW 29TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: T ( ) Delete  
Name: BORST, MICHELE Z  
Address: 4926 NW 19TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

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

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

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

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

Title: P (X) Change ( ) Addition  
Name: RICKMAN, PHILIP  
Address: 4328 N.W. 29TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: SD (X) Change ( ) Addition  
Name: GARCIA, JOE  
Address: 606 N.E. 1ST STREET  
City-St-Zip: GAINESVILLE, FL 32601

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: MICHELE Z BORST

T

01/28/2009

Electronic Signature of Signing Officer or Director

Date