

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763319

**FILED**  
**Jan 22, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**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: P  
Name: CAVALLINO, RICARDO  
Address: 22 S.E. 5TH AVE.  
City-St-Zip: GAINESVILLE, FL 32601

Title: VP  
Name: RIVIERE, MARIA LUISA  
Address: 3300 SW ARCHER ROAD  
City-St-Zip: GAINESVILLE, FL 32608

Title: S  
Name: HAASE, RONALD  
Address: 25608 DEVONIA STREET  
City-St-Zip: MELROSE, FL 32666

Title: D  
Name: GARCIA, JOE  
Address: 606 N.E. 1ST STREET  
City-St-Zip: GAINESVILLE, FL 32601

Title: T  
Name: BORST, MICHELE Z  
Address: 4926 N.W. 19TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: CD  
Name: CHRISTIAN, CEDRIC  
Address: 3300 S.W. ARCHER ROAD  
City-St-Zip: GAINESVILLE, FL 32601

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: MICHELE Z. BORST

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01/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date