

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763319

FILED
Jan 06, 2011
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: 90-0630991

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:

FL N CHAPT. AMERICAN INSTITUTE OF ARCHITEC
P.O BOX 1571
GAINESVILLE, FL 32602 US

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: FL N CHAPTER AMERICAN INSTITUTE OF ARCHITE

01/06/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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 BORST

VP

01/06/2011

Electronic Signature of Signing Officer or Director

Date