

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764714

FILED
Apr 04, 2011
Secretary of State

Entity Name: SMPS FLORIDA CHAPTER, INC.

Current Principal Place of Business:

1900 SUMMIT TOWER BLVD.
SUITE 150
ORLANDO, FL 32810 US

New Principal Place of Business:

255 SOUTH ORANGE AVENUE
SUITE 1600
ORLANDO, FL 32801 US

Current Mailing Address:

P.O. BOX 1459
ORLANDO, FL 32802 US

New Mailing Address:

FEI Number: 59-2648921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLAPROTH, KATY
1900 SUMMIT TOWER BLVD.
SUITE 150
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

CRAPPS, ROSALIND
255 SOUTH ORANGE AVENUE
SUITE 1600
ORLANDO, FL 32801 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: ROSALIND CRAPPS

04/04/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CRAPPS, ROSALIND
Address: 255 SOUTH ORANGE AVENUE, SUITE 1600
City-St-Zip: ORLANDO, FL 32801

Title: VP
Name: STILES,, BARBARA CPSM
Address: 5750 MAJOR BLVD #400
City-St-Zip: ORLANDO, FL 32819

Title: S
Name: PETERSEN, KAREN
Address: 1912 BOOTH CIRCLE, SUITE 100
City-St-Zip: LONGWOOD, FL 32750 US

Title: T
Name: CHAFFIN, MAGGIE
Address: 225 E. ROBINSON STREET, SUITE 405
City-St-Zip: ORLANDO, FL 32801 US

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: MAGGIE CHAFFIN

T

04/04/2011

Electronic Signature of Signing Officer or Director

Date