

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2011
Secretary of State

DOCUMENT# F09000002549

Entity Name: INTERNATIONAL ASSOCIATION OF EATING DISORDERS PROFESSIONALS FOUNDATION, SOUTH FLORIDA CHAPTER, INC.

Current Principal Place of Business:

7200 W. CAMINO REAL #303
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

2200 NW CORPORATE BLVD, SUITE 311
BOCA RATON, FL 33431

New Mailing Address:

7200 W. CAMINO REAL #303
BOCA RATON, FL 33433

FEI Number: 80-0393032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUPTA, HENAH DR
7200 W. CAMINO REAL #303
BOCA RATON, FL 33433 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: PRES
Name: GUPTA, HENAH
Address: 7200 W. CAMINO REAL, STE 303
City-St-Zip: BOCA RATON, FL 33433

Title: VP
Name: ARBELAEZ-LOPEZ, NICOLLE
Address: 1640 TOWN CENTER CIRCLE, #204
City-St-Zip: WESTON, FL 33326

Title: SEC.
Name: TRAYLOR, ANNA
Address: 7200 W. CAMINO REAL #303
City-St-Zip: BOCA RATON, FL 33433

Title: TRE
Name: BERGER, NAOMI
Address: 2385 NW EXECUTIVE CENTER DRIVE STE 100
City-St-Zip: BOCA RATON, FL 33431

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: HENAH GUPTA, PHD

PRES

02/28/2011

Electronic Signature of Signing Officer or Director

Date