

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004309

FILED  
Jan 30, 2009  
Secretary of State

**Entity Name:** AMERICAN BUSINESSPERSONS ASSOCIATION, INC.

**Current Principal Place of Business:**

350 FAIRWAY DRIVE SUITE 200  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

350 FAIRWAY DRIVE SUITE 200  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

**FEI Number:** 06-0921920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FURNARI, GIACOMO  
350 FAIRWAY DRIVE SUITE 200  
DEERFIELD BEACH, FL 33441 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: PVD ( ) Delete  
Name: FURNARI, GIACOMO  
Address: 350 FAIRWAY DRIVE SUITE 200  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: TD ( ) Delete  
Name: PAGONIS, JACQUELINE L  
Address: 350 FAIRWAY DR., STE 200  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: S ( ) Delete  
Name: TONGE, EUSTACE N  
Address: 350 FAIRWAY DR., STE 200  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: D ( ) Delete  
Name: PAGONIS, JOHN  
Address: 350 FAIRWAY DR., STE 200  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

**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: ( ) 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: GIACOMO FURNARI

PRES

01/30/2009

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

\_\_\_\_\_  
Date