

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004533

FILED
Feb 10, 2009
Secretary of State

Entity Name: PROJECT MANAGEMENT INSTITUTE SOUTH FLORIDA CHAPTER, INC.

Current Principal Place of Business:

4737 N OCEAN DRIVE #148
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

4737 N OCEAN DRIVE #148
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-3167101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIANA, RICARDO
3300 NE 192 ST #1007
AVENTURA, FL 33180 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 () Delete
Name: TRIANA, RICARDO
Address: 3300 NE 192 ST #1007
City-St-Zip: AVENTURA, FL 33180

Title: VPFI () Delete
Name: LENIHAN, ROBIN
Address: 1301 RIVER REACH DRIVE, APT 402
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: PREL () Delete
Name: SAENZ, BERNIE
Address: 3867 TURTLE RUN BLVD #2331
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VPOP () Delete
Name: RODRIGUEZ, M.MARLENE
Address: 17440 NW 67 COURT UNIT L
City-St-Zip: MIAMI, FL 33015

Title: PSTP () Delete
Name: GAROFANO, PATRICIA
Address: 2711 NE 56 COUT
City-St-Zip: FORT LAUDERDALE, FL 33308

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:

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: RICARDO TRIANA

PRES

02/10/2009

Electronic Signature of Signing Officer or Director

Date