

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007741

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** CENTRAL FLORIDA CHAPTER OF THE AMERICAN FENCE ASSOCIATION INC.

**Current Principal Place of Business:**

C/O KATHY TAYLOR - 1603 BAYHILL DR.  
OLDSMAR, FL 34677

**New Principal Place of Business:**

**Current Mailing Address:**

C/O KATHY TAYLOR - 1603 BAYHILL DR.  
OLDSMAR, FL 34677

**New Mailing Address:**

**FEI Number:** 59-3682579

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYLOR, KATHY  
1603 BAYHILL DR.  
OLDSMAR, FL 34677 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: P/D  
Name: EVERIDGE, BILLY  
Address: 1603 BAYHILL DR.  
City-St-Zip: OLDSMAR, FL 34677

Title: VP/D  
Name: HILL, SHELIA  
Address: 1603 BAYHILL DR.  
City-St-Zip: OLDSMAR, FL 34677

Title: S/D  
Name: KNOFFER, KIMBERLY  
Address: 1603 BAYHILL DR.  
City-St-Zip: OLDSMAR, FL 34677

Title: T/D  
Name: TAYLOR, KATHY  
Address: 1603 BAYHILL DR.  
City-St-Zip: OLDSMAR, FL 34677

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: KATHY TAYLOR

T/D

01/05/2012

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

\_\_\_\_\_  
Date