

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 07, 2004
Secretary of State**

DOCUMENT# N01000006186

Entity Name: FLORIDA CHAPTER OF THE SOCIETY OF CONSUMER AFFAIRS PROFESSIONALS IN BUSINESS, INC.

Current Principal Place of Business:

526 EAST PARK AVENUE
200
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

675 N. WASHINGTON STEET
200
ALEXANDRIA, VA 22314

New Mailing Address:

FEI Number: 75-3019641 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HIQ CORPORATE SERVICES, INC.
526 E PARK AVE, SUITE 200
TALLAHASSEE, FL 32301 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: PD () Delete
Name: GALLANT, KEITH
Address: 4920 CONFERENCE WAY S #8
City-St-Zip: BOCA RATON, FL 33444

Title: VPD () Delete
Name: TISDLE, JAMES E
Address: 5701 W. SUNRISE BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33313

Title: VPD () Delete
Name: HARRIS, TAMI
Address: 2901 - 48TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33711

Title: SD () Delete
Name: GEORGES, DOROTHY
Address: 3655 N.W. 87TH AVENUE
City-St-Zip: MIAMI, FL 331782428

Title: TD (X) Delete
Name: HUTCHINSON, ARTHUR
Address: 2002 N. LOIS AVENUE
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARRY, SEAN
Address: 1010 PERSIMMON STREET
City-St-Zip: CELEBRATION, FL 34747

Title: VPD (X) Change () Addition
Name: GLASS, HOWARD
Address: 4410 NORTH STATE ROAD 7
City-St-Zip: FT. LAUDERDALE, FL 33319

Title: VPD (X) Change () Addition
Name: CONSTANTINE, ROBERT
Address: 4410 NORTH STATE ROAD 7
City-St-Zip: FT. LAUDERDALE, FL 33319

Title: TD (X) Change () Addition
Name: HUTCHINSON, ARTHUR
Address: 1410 NORTH WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33607

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SEAN BARRY

PD

07/07/2004

Electronic Signature of Signing Officer or Director

Date