2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N03000000250

Entity Name: THE SOUTH FLORIDA CHAPTER OF THE ASSOCIATION OF CERTIFIED FRAUD EXAMINERS, INC.

Current Principal Place of Business:

BEHAR, GUTT & GLAZER, P.A.
2999 N.E. 191ST STREET 5TH FLOOR
AVENTURA, FL 33180

New Principal Place of Business:

401 E. LAS OLAS BLVD
SUITE 1400
FT. LAUDERDALE, FL 33301

Current Mailing Address:

BEHAR, GUTT & GLAZER, P.A.
2999 N.E. 191ST STREET 5TH FLOOR
AVENTURA, FL 33180

New Mailing Address:

401 E. LAS OLAS BLVD
SUITE 1400
FT. LAUDERDALE, FL 33301

FEI Number: 55-0814183 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEHAR, BRIAN ESQ.
BEHAR, GUTT & GLAZER, P.A.
2999 N.E. 191ST STREET 5TH FLOOR
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

CANCINO, FERNANDO CFE
401 E. LAS OLAS BLVD
SUITE 1400
FT. LAUDERDALE, FL 33301 US

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: FERNANDO CANCINO 04/30/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete
Name: LANDON, JAMES C
Address: 4401 N. FEDERAL HIGHWAY, SUITE 202
City-St-Zip: BOCA RATON, FL 33431

Title: V,D ( ) Delete
Name: ANSARI, ALI
Address: 801 BRICKELL AVENUE, NINETH FLOOR
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: BEHAR, BRIAN ESQ.
Address: 2999 N.E. 191ST STREET, 5TH FLOOR
City-St-Zip: AVENTURA, FL 33180

Title: T,D ( ) Delete
Name: MAINS, THERESA
Address: 450 EAST LAS OLAS BLVD, STE 950
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D (X) Delete
Name: LOMBARD, JORDAN
Address: 801 BRICKELL AVENUE, SUITE 2450
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition
Name: CANCINO, FERNANDO CFE
Address: 401 E. LAS OLAS BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: V,D (X) Change ( ) Addition
Name: GARCES, IVAN A CPA
Address: 2699 S. BAYSHORE DRIVE
City-St-Zip: MIAMI, FL 33133

Title: D (X) Change ( ) Addition
Name: MEDINA, DANIEL
Address: 801 BRICKELL AVENUE, SUITE 2450
City-St-Zip: MIAMI, FL 33131

Title: D (X) Change ( ) Addition
Name: LOMBARD, JORDAN
Address: 801 BRICKELL AVENUE, SUITE 2450
City-St-Zip: MIAMI, FL 33131

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: FERNANDO CANCINO P.D 04/30/2009
Electronic Signature of Signing Officer or Director Date