2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2011
Secretary of State

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

Current Principal Place of Business:

2699 SOUTH BAYSHORE DRIVE
C/O KAUFMAN ROSSIN - MR. IVAN GARCES
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2699 SOUTH BAYSHORE DRIVE
C/O KAUFMAN ROSSIN - MR. IVAN GARCES
MIAMI, FL 33133

New Mailing Address:

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

Name and Address of Current Registered Agent:

CANCINO, FERNANDO CFE
11231 NW 48 TERRACE
DORAL, FL 33178 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: CANCINO, FERNANDO CFE
Address: 11231 NW 48 TERRACE
City-St-Zip: DORAL, FL 33178

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

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

Title: T, D
Name: MINCH, DIANE CPA
Address: 8453 NW 27TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: FERNANDO CANCINO PRES 02/10/2011

Electronic Signature of Signing Officer or Director — Date