

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000689

FILED
Jan 31, 2005
Secretary of State

Entity Name: SOUTH FLORIDA ASSOCIATION FOR FINANCIAL PROFESSIONALS INC.

Current Principal Place of Business:

PO BOX 918617
ORLANDO, FL 328918617

New Principal Place of Business:

Current Mailing Address:

PO BOX 918617
ORLANDO, FL 328918617

New Mailing Address:

FEI Number: 55-0812983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, KARL
1324 SW 17TH TERR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

DIAZ, KARL
1390 S DIXIE HWY #2124
CORAL GABLES, FL 33146 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: KARL DIAZ

01/31/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ETHERIDGE, LAURA
Address: 801 BRICKELL AVE, SUITE 2480
City-St-Zip: MIAMI, FL 33131

Title: VD () Delete
Name: KENNEDY, MARIA
Address: 2600 SW 3RD AVE
City-St-Zip: MIAMI, FL 33129

Title: TD () Delete
Name: DIAZ, KARL
Address: 1324 SW 17TH TERR
City-St-Zip: MIAMI, FL 33145

Title: SD () Delete
Name: INGOYEN, HILDA
Address: 777 BRICKELL AVE, FOURTH FLOOR MC 1041
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ETHERIDGE, LAURA
Address: 8750 DORAL BLVD 7TH FLOOR
City-St-Zip: MIAMI, FL 33178

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

Title: TD (X) Change () Addition
Name: DIAZ, KARL
Address: 1390 S DIXIE HWY #2124
City-St-Zip: CORAL GABLES, FL 33145

Title: SD (X) Change () Addition
Name: IRIGOYEN, HILDA
Address: 777 BRICKELL AVE, FOURTH FLOOR MC 1041
City-St-Zip: MIAMI, FL 33131

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: KARL DIAZ

TD

01/31/2005

Electronic Signature of Signing Officer or Director

Date