

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000646

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: FLORIDA FAMILY OFFICE FORUM, INC.

## Current Principal Place of Business:

C/O SFP GROUP, LTD, 1172 SO. DIXIE HWY  
#481  
CORAL GABLES, FL 33146

## Current Mailing Address:

C/O SFP GROUP, LTD, 1172 SO. DIXIE HWY  
#481  
CORAL GABLES, FL 33146

## New Principal Place of Business:

C/O KATE TESTORF  
21286 SWEETWATER LANE N  
BOCA RATON, FL 33428

## New Mailing Address:

C/O KATE TESTORF  
21286 SWEETWATER LANE N  
BOCA RATON, FL 33428

FEI Number: 20-0669599

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KING, KRISTY A  
C/O SFP GROUP, LTD, 1172 SO. DIXIE HWY  
#481  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

TESTORF, KATE B  
21286 SWEETWATER LANE N  
BOCA RATON, FL 33428 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: KATE B TESTORF

04/14/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D/S ( ) Delete  
Name: KING, KRISTY A  
Address: C/O SFP GROUP, LTD, 1172 SO DIXIE HWY #481  
City-St-Zip: CORAL GABLES, FL 33146

Title: DT ( ) Delete  
Name: SCHULER, LARRY  
Address: C/O DEMETREE BLDRS, 3348 EDGEWATER DR.  
City-St-Zip: ORLANDO, FL 32804

Title: DVP ( ) Delete  
Name: RYZEWIC, SUSAN R  
Address: EHR INVESTS, 5000 SAWGRASS VILLAGE CIR 2  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DVP ( ) Delete  
Name: HACKNEY, MARY  
Address: 404 CITATION POINT  
City-St-Zip: NAPLES, FL 34104

Title: DP ( ) Delete  
Name: BEDARD, JULIE M  
Address: ONE NORTH CLEMATIN ST STE 320  
City-St-Zip: WEST PALM BEACH, FL 33401

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/S (X) Change ( ) Addition  
Name: TESTORF, KATE B  
Address: 21286 SWEETWATER LANE N  
City-St-Zip: BOCA RATON, FL 33428

Title: DT (X) Change ( ) Addition  
Name: MAPES, PAUL  
Address: 1601 BELVEDERE ROAD SUITE 407S  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DVP (X) Change ( ) Addition  
Name: THOMSON, ROB  
Address: 1201 SOUTH ORLANDO AVE SUITE 370  
City-St-Zip: WINTER PARK, FL 32789

Title: DVP (X) Change ( ) Addition  
Name: ALLEN, DOUG  
Address: 140 E BUCHANON SUITE1  
City-St-Zip: PRAIRE GROVE, AR 72753

Title: DP (X) Change ( ) Addition  
Name: VOGES, BILL  
Address: 275 CLYDE MORRIS BLVD  
City-St-Zip: ORMOND BEACH, FL 32174

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: KATE B. TESTORF

SEC

04/14/2009

Electronic Signature of Signing Officer or Director

Date