2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N04000005169

Entity Name: SUNSHINE STATE CHAPTER OF THE DOOR AND HARDWARE INSTITUTE INC

Current Principal Place of Business:

6564 44TH STREET NORTH
UNIT 805
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

6564 44TH STREET NORTH
UNIT 805
PINELLAS PARK, FL 33781

New Mailing Address:

FEI Number: 03-0428612 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISHER, JOHN
6564 44TH STREET NORTH
UNIT 805
PINELLAS PARK, FL 33781 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	( ) Delete
Name:	O'CULL, MARTY	
Address:	1956 BRENGLE AVE	
City-St-Zip:	ORLANDO, FL 32808	
Title:	VP	( ) Delete
Name:	PULSIFER, BRIDGETT	
Address:	2721 REGENT STREET	
City-St-Zip:	ORLANDO, FL 32804	
Title:	S	( ) Delete
Name:	BELL, STEVE	
Address:	11109 AUTUMN WIND LOOP	
City-St-Zip:	CLERMONT, FL 34711	
Title:	T	( ) Delete
Name:	FISHER, JOHN	
Address:	6564 44TH STREET NORTH #805	
City-St-Zip:	PINELLAS PARK, FL 33781	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JOHN FISHER T 01/16/2009

Electronic Signature of Signing Officer or Director — Date