

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009146

FILED  
Jan 27, 2010  
Secretary of State

**Entity Name:** ASSOCIATION OF CORPORATE COUNSEL AMERICA CENTRAL FLORIDA (INC.)

**Current Principal Place of Business:**

1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 59-3206819

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name: MAC MAHON CRANNELL, KATHLEEN  
Address: 8550 ASTRONAUT BOULEVARD, USK-T21  
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: VP  
Name: IM, JAE  
Address: 8427 SOUTH PARK CIRCLE, SUITE 500  
City-St-Zip: ORLANDO, FL 32819 US

Title: S  
Name: FRIEDBERG, WENDY  
Address: 220 EAST CENTRAL PARKWAY, SUITE 4010  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: T  
Name: BOLTON, DAVID  
Address: 8550 ASTRONAUT BLVD. USK-T21  
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: D  
Name: ASHLEY, DEBORAH  
Address: 210 LAKE AVENUE  
City-St-Zip: ORLANDO, FL 32801 US

Title: D  
Name: LODDE, KELLY  
Address: 5323 MILLENIA LAKES BOULEVARD, SUITE 400  
City-St-Zip: ORLANDO, FL 32839

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: KATHY CRANNELL

P

01/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date