

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000012044

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** PROFESSIONAL TOUR GUIDE ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

21230 NE 23 COURT  
MIAMI, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

21230 NE 23 COURT  
MIAMI, FL 33180

**New Mailing Address:**

**FEI Number:** 20-2183027

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STAMATOPOULOS, HELENA  
21230 NE 23 COURT  
MIAMI, FL 33180 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:** DP  
**Name:** DORAN, KEVIN  
**Address:** 5700 COLLINS AVE  
**City-St-Zip:** MIAMI BEACH, FL 33140

**Title:** DVP  
**Name:** KELLY, SHEILA  
**Address:** 4730 PINETREE DRIVE #2  
**City-St-Zip:** MIAMI BEACH, FL 33140

**Title:** DS  
**Name:** RODEN, BRYN  
**Address:** 353 W 47TH STREET  
**City-St-Zip:** MIAMI BEACH, FL 33140

**Title:** DT  
**Name:** STAMATOPOULOS, HELENA  
**Address:** 21230 NE 23 COURT  
**City-St-Zip:** MIAMI, FL 33180

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:** HELENA STAMATOPOULOS

DT

04/19/2011

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

\_\_\_\_\_  
Date