2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007
Secretary of State

DOCUMENT# N05000000290

Entity Name: THE ASSOCIATION OF FUNDRAISING PROFESSIONALS ARREDONDO CHAPTER, INC.

Current Principal Place of Business:

10728 NW 38 PL
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

10728 NW 38 PL
GAINESVILLE, FL 32606 US

New Mailing Address:

PO BOX 324
LIVE OAK, FL 32064 US

FEI Number: 42-1692004 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEGENER, STUART
1734 NW 7TH PLACE
GAINESVILLE, FL 32603 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: D ( ) Delete
Name: DAVIS, AMY
Address: 23320 N. SR 235
City-St-Zip: BROOKER, FL 32622

Title: D ( ) Delete
Name: HINSON, MICHELLE
Address: 10728 NW 38 PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete
Name: JEFFERS, JENNIFER
Address: 7631 NW 36 PL
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete
Name: YARICK, WILLIAM
Address: P.O.BOX 324
City-St-Zip: LIVE OAK, FL 32064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WEGENER, STUART
Address: 1734 NW 7TH PLACE
City-St-Zip: GAINESVILLE, FL 32603

Title: D (X) Change ( ) Addition
Name: MENOHER, DEBBIE
Address: 2701 NW 103RD WAY
City-St-Zip: GAINESVILLE, FL 32606

Title: D (X) Change ( ) Addition
Name: JAMES, BOB
Address: 605 NE 1ST STREET
City-St-Zip: LAKE CITY, FL 32601

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

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM YARICK D 04/04/2007

Electronic Signature of Signing Officer or Director — Date