## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000006523

City-St-Zip:

OCALA, FL 34471

FILED Apr 30, 2008 Secretary of State

Entity Name: U.S. GREEN BUILDING COUNCIL - HEART OF FLORIDA CHAPTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 232 STADIUM, UNIVERSITY OF FLORIDA GALE LEMERAND DRIVE GAINESVILLE, FL 32611 **New Mailing Address: Current Mailing Address:** 232 STADIUM, UNIVERSITY OF FLORIDA P.O. BOX 357815 GALE LEMERAND DRIVE GAINESVILLE, FL 326357815 US GAINESVILLE, FL 32611 FEI Number: 26-0623315 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: VAN DER LIKE, ROBERT N MONROE, SCOTT R 4639 NW 53RD AVENUE 4033 SE 3RD STREET OCALA, FL 34471 US GAINESVILLE, FL 32606 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: SCOTT R MONROE 04/30/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ARMAGHANI, BAHAR Name: Name: STADIUM 232, GALE LEMERAND DRIVE Address: Address: City-St-Zip: GAINESVILLE, FL 32611 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ALBERTSON, MILES Name: FREY, JAMES Name: Address: 1600 SW ARCHER RD, RM DG-23 JHMHSC Address: 85 SW 52ND AVENUE City-St-Zip: GAINESVILLE, FL 32610 City-St-Zip: OCALA, FL 34474 Title: SECY () Delete Title: () Change () Addition EASTMAN, CHRIS Name: Name: Address: 118A NW 8TH AVENUE Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: CM C ( ) Delete Title: **TRES** (X) Change ( ) Addition Name: WALKER, JOSEPH Name: MONROE, SCOTT R Address: 5700 SW 34TH STREET, SUITE 1307 Address: 4639 NW 53RD AVENUE City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: GAINESVILLE, FL 32606 Title: ED C (X) Delete Title: () Change () Addition VAN DER LIKE, ROBERT Name: Name: 4033 SE 3RD STREET Address: Address:

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.

City-St-Zip:

SIGNATURE: SCOTT R MONROE TRES 04/30/2008