

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006523

FILED
Apr 30, 2009
Secretary of State

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

Current Principal Place of Business:

232 STADIUM, UNIVERSITY OF FLORIDA
GALE LEMERAND DRIVE
GAINESVILLE, FL 32611

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 357815
GAINESVILLE, FL 326357815 US

New Mailing Address:

FEI Number: 26-0623315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONROE, SCOTT R
4639 NW 53RD AVENUE
GAINESVILLE, FL 32606 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: ARMAGHANI, BAHAR
Address: STADIUM 232, GALE LEMERAND DRIVE
City-St-Zip: GAINESVILLE, FL 32611

Title: VP () Delete
Name: FREY, JAMES
Address: 85 SW 52ND AVENUE
City-St-Zip: OCALA, FL 34474

Title: SECY () Delete
Name: EASTMAN, CHRIS
Address: 118A NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32601

Title: TRES () Delete
Name: MONROE, SCOTT R
Address: 4639 NW 53RD AVENUE
City-St-Zip: GAINESVILLE, FL 32606

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: SCOTT MONROE

TRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date