2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2010
Secretary of State

DOCUMENT# N07000009233

Entity Name: FLORIDA BORDERLINE PERSONALITY DISORDER ASSOCIATION, INC.

Current Principal Place of Business:

233 3RD STREET NORTH
#103
ST. PETERSBURG, FL 33701

New Principal Place of Business:

227 7TH AVENUE NE
#6
ST. PETERSBURG, FL 33701

Current Mailing Address:

233 3RD STREET NORTH
#103
ST. PETERSBURG, FL 33701

New Mailing Address:

PO BOX 756
ST. PETERSBURG, FL 33731

FEI Number: 45-0572897 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SMITH, AMANDA L
227 7TH AVE NE
#6
ST. PETERSBURG, FL 33701 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: VP
Name: MATISIK, EDWARD N
Address: 4201 MASSACHUSETTS AVE NW #5047
City-St-Zip: WASHINGTON, DC 20016

Title: TRES
Name: ELL, MICHAEL
Address: 4216 BAY CT NE
City-St-Zip: ALBUQUERQUE, NM 87111

Title: PRES
Name: SMITH, AMANDA L
Address: PO BOX 756
City-St-Zip: ST. PETERSBURG, FL 33731

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: AMANDA L. SMITH PRES 05/01/2010
Electronic Signature of Signing Officer or Director — Date