

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009517

FILED
Jan 05, 2012
Secretary of State

Entity Name: IAHSS CENTRAL FLORIDA CHAPTER, INC.

Current Principal Place of Business:

1 TAMPA GENERAL CIRCLE
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 23546
TAMPA, FL 33623 US

New Mailing Address:

FEI Number: 26-1162777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEERS, BRIAN J TREAS.
10310 SPRINGROSE DRIVE
TAMPA, FL 33626 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: CHR
Name: VENEZIA, ANTHONY
Address: P.O. BOX 23546
City-St-Zip: TAMPA, FL 33623 US

Title: CH-E
Name: WATSON, ROBERT
Address: P.O. BOX 23546
City-St-Zip: TAMPA, FL 33623 US

Title: TRE
Name: BEERS, BRIAN J
Address: P.O. BOX 23546
City-St-Zip: TAMPA, FL 33623 US

Title: SEC
Name: STARK, CARL
Address: P.O. BOX 23546
City-St-Zip: TAMPA, FL 33623 US

Title: V CH
Name: FOURNIER, ROGER
Address: P.O. BOX 23546
City-St-Zip: TAMPA, FL 33623 US

Title: P CH
Name: MAINS, PAUL
Address: P.O. BOX 23546
City-St-Zip: TAMPA, FL 33623 US

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: BRIAN J BEERS

TRE

01/05/2012

Electronic Signature of Signing Officer or Director

Date