

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 02, 2010
Secretary of State

DOCUMENT# N08000007589

Entity Name: ALLIANCE OF FLORIDA BUSINESS BROKERS, INC.**Current Principal Place of Business:**7910 SUMMERLIN LAKES DR.
FORT MYERS, FL 33907 US**New Principal Place of Business:****Current Mailing Address:**7910 SUMMERLIN LAKES DR.
FORT MYERS, FL 33907 US**New Mailing Address:****FEI Number:** 26-3564774**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WELBORN, BRAD
7910 SUMMERLIN LAKES DR.
FORT MYERS, FL 33907 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: PD
Name: WELBORN, BRAD
Address: 7910 SUMMERLIN LAKES DR.
City-St-Zip: FORT MYERS, FL 33907 US

Title: VD
Name: NAEDEL, DICK
Address: 9130 GALLERIA COURT #119
City-St-Zip: NAPLES, FL 34109 US

Title: TD
Name: EOVINO, TIMOTHY M
Address: 550 5TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102 US

Title: D
Name: JONES, ANITA B
Address: 2815 NW 13TH ST, STE 200
City-St-Zip: GAINESVILLE, FL 32609 US

Title: SD
Name: RICHARDS, EDNA
Address: 5111 MEMORIAL HWY.
City-St-Zip: TAMPA, FL 33634

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: TIMOTHY M EOVINO

TD

12/02/2010

Electronic Signature of Signing Officer or Director

Date