

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001641

FILED
May 07, 2010
Secretary of State

Entity Name: FLORIDA ALLIANCE OF MARITIME ORGANIZATIONS, INC.

Current Principal Place of Business:

11200 PINE BLVD., SUITE 201
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

11200 PINE BLVD., SUITE 201
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 26-4290906 **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:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: D
Name: PAIGE, MICHELE
Address: 11200 PINE BLVD., SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D
Name: SAMS, MATTHEW
Address: 11200 PINE BLVD., SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D
Name: FOX, JOHN
Address: 11200 PINE BLVD., SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D
Name: COLEND, CINDY
Address: 11200 PINE BLVD., SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D
Name: NUGENT-HILL, JENNIFER
Address: 11200 PINE BLVD., SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33026

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: CINDY COLEND

D

05/07/2010

Electronic Signature of Signing Officer or Director

Date