

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005417

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** CENTRAL FLORIDA CHAPTER OF THE VIBRATION INSTITUTE INC.

**Current Principal Place of Business:**

936 CLASSIC VIEW DR  
AUBURDALE, FL 33823

**New Principal Place of Business:**

**Current Mailing Address:**

936 CLASSIC VIEW DR  
AUBURDALE, FL 33823

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, AUDRY K  
5237 BRIGHTON SHORE DR  
APOLLO BEACH, FL 33572 US

**Name and Address of New Registered Agent:**

SMITH, AUDRY K  
7525 VIA GRANDE  
BOYNTON BEACH, FL 33437 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: AUDRY KEITH SMITH

03/30/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WARD, TALMADGE D JR.  
Address: 936 CLASSIC VIEW DR  
City-St-Zip: AUBURDALE, FL 33823

Title: VP  
Name: MALEC, STEPHEN JR  
Address: 6022 PALOMAGLADE DR  
City-St-Zip: LITHIA, FL 33547

Title: SEC  
Name: HILDEBRAND, CHUCK  
Address: 2401 N.E. 48 ST  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: TRE  
Name: SMITH, AUDRY K  
Address: 7525 VIA GRANDE  
City-St-Zip: BOYNTON BEACH, FL 33437

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: AUDRY KEITH SMITH

TRE

03/30/2010

Electronic Signature of Signing Officer or Director

Date