2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001362

FILED Mar 28, 2012 Secretary of State

Entity Name: PROFESSIONAL MEDIATION INSTITUTE, INC.

Current Principal Place of Business: New Principal Place of Business:

1709 HERMITAGE BLVD STE 200 TALLAHASSEE, FL 32308

Current Mailing Address: New Mailing Address:

1709 HERMITAGE BLVD STE 200 TALLAHASSEE, FL 32308

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

DIETZ, ROBERT 315 EAST ROBINSON STE 600 ORLANDO, FL 32801 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:
 ROULHAC, JULIET M

 Address:
 PO BOX 29100

 City-St-Zip:
 MIAMI, FL 331029100

Title: D

Name: SCHICKEL, JAKE Address: PO BOX 1860

City-St-Zip: JACKSONVILLE, FL 322011860

Title:

 Name:
 HARTER, CHRISTINE

 Address:
 PO BOX 1779

 City-St-Zip:
 OCALA, FL 344781779

Title: D

Name: SUSKIN, STUART

Address: 1900 SW 34TH ST STE 202 City-St-Zip: GAINESVILLE, FL 326081202

Title: DP

Name: DIETZ, ROBERT Address: PO BOX 3000

City-St-Zip: ORLANDO, FL 328023000

Title: DV

Name: LANGHAM, DAVID

Address: 700 SOUTH PALAFOX ST STE 305 City-St-Zip: PENSACOLA, FL 325025958

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: ROBERT DIETZ PRES 03/28/2012