

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000007511

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** STUDENTS IN FREE ENTERPRISE AT UNIVERSITY OF SOUTH FLORIDA, INCORPORATED

**Current Principal Place of Business:**

4202 EAST FOWLER AVENUE  
SVC 1102  
TAMPA, FL 33620 US

**New Principal Place of Business:**

**Current Mailing Address:**

4202 EAST FOWLER AVENUE  
SVC 1102  
TAMPA, FL 33620 US

**New Mailing Address:**

**FEI Number:** 22-3913287

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LOVETT, DAMEION J MR.  
10644 EGRET HAVEN LANE  
RIVERVIEW, FL 33578 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: DIR  
Name: LOVETT, DAMEION J MR.  
Address: 4202 EAST FOWLER AVENUE SVC 1102  
City-St-Zip: TAMPA, FL 33620 US

Title: DIR  
Name: JAP, FERDIAN L MR.  
Address: 13312 WATERFORD RUN DRIVE  
City-St-Zip: RIVERVIEW, FL 33569 US

Title: DIR  
Name: GONZALEZ, KATHARINE J MRS.  
Address: 311 SPRING CREEK AVENUE  
City-St-Zip: BRANDON, FL 33510 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: DAMEION LOVETT

DIR

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date