

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 24, 2012
Secretary of State

DOCUMENT# N18206

Entity Name: FLORIDA PUBLIC HUMAN RESOURCES ASSOCIATION, INC.**Current Principal Place of Business:**401 EAST LAS OLAS BLVD
#130-452
FORT LAUDERDALE, FL 33301 US**New Principal Place of Business:****Current Mailing Address:**401 EAST LAS OLAS BLVD
#130-452
FORT LAUDERDALE, FL 33301 US**New Mailing Address:****FEI Number:** 59-2808589 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ELLISON, SALLY
401 EAST LAS OLAS BLVD
130-452
FT LAUDERDALE, FL 33301 US**Name and Address of New Registered Agent:**STEINBERG, BONNIE
401 EAST LAS OLAS BLVD
130-452
FT LAUDERDALE, FL 33301 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: BONNIE STEINBERG

10/24/2012

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** P
Name: STEINBERG, BONNIE
Address: 401 EAST LAS OLAS BLVD, #130-452
City-St-Zip: FT. LAUDERDALE, FL 33301 US**Title:** PE
Name: STRICKLAND, VICKIE
Address: 401 EAST LAS OLAS BLVD, #130-452
City-St-Zip: FT. LAUDERDALE, FL 33301 US**Title:** VP
Name: ELLISON, SALLY
Address: 401 EAST LAS OLAS BLVD, #130-452
City-St-Zip: FT. LAUDERDALE, FL 33301 US**Title:** T
Name: STEINBERGER, ARLETTE
Address: 401 EAST LAS OLAS BLVD, #130-452
City-St-Zip: FT LAUDERDALE, FL 33301 US**Title:** S
Name: BROOKS, ANDY
Address: 401 EAST LAS OLAS BLVD, #130-452
City-St-Zip: FT LAUDEDALE, FL 33301 US**Title:** IPP
Name: DENARO, JOSEPH
Address: 401 EAST LAS OLAS BLVD, #130-452
City-St-Zip: FT LAUDERDALE, FL 33301 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: BONNIE STEINBERG

P

10/24/2012

Electronic Signature of Signing Officer or Director_____
Date