2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2012
Secretary of State

DOCUMENT# N20970

Entity Name: GOVERNMENT SUPERVISORS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

3600 RED ROAD
SUITE 405
MIRAMAR, FL 33025 US

New Principal Place of Business:

Current Mailing Address:

3600 RED ROAD
SUITE 405
MIRAMAR, FL 33025 US

New Mailing Address:

FEI Number: 59-2508942 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SLESNICK, DONALD D., II ESQ.
2701 PONCE DE LEON BLVD.
200
CORAL GABLES, FL 33134 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: PD
Name: BLACKMAN, GREG
Address: 7801 FAIRWAY BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: VD
Name: CASTILLO, OTTO
Address: 8940 SW 186TH TERRACE
City-St-Zip: MIAMI, FL 33157

Title: T
Name: CLARIT, WALTER
Address: 2830 NW 65TH TERRACE
City-St-Zip: MIAMI, FL 33147

Title: SD
Name: COLE, MICHAEL
Address: 13003 SW 114 PLACE
City-St-Zip: MIAMI, FL 33176

Title: 2V
Name: SMITH, MARY ANN
Address: 110 NE 28TH STREET
City-St-Zip: POMPANO BEACH, FL 33064

Title: SA
Name: PERRONE, PAUL
Address: 16645 106 TERRACE NORTH
City-St-Zip: JUPITER, FL 33478

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: GREG BLACKMAN PD 03/19/2012

Electronic Signature of Signing Officer or Director Date