## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N31754

FILED Mar 02, 2010 Secretary of State

Entity Name: NAIOP CENTRAL FLORIDA CHAPTER, INC.

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

3306 FLORENE DRIVE
ORLANDO, FL 32806 US
219 EAST GRANT STREET
ORLANDO, FL 32806 US
ORLANDO, FL 32806 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 560667 ORLAND, FL 32856

FEI Number: 59-2965099 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MILLER, SHANNON L 219 E. GRANT STREET ORLANDO, FL 32806 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: TD

Name: MILLER, SCOTT

Address: 4767 NEW BROAD STREET, SUITE 217

City-St-Zip: ORLANDO, FL 32814

Title: F

Name: HURLEY, MARY
Address: PO BOX 568367
City-St-Zip: ORLANDO, FL 32856

Title: P-E

 Name:
 FIORILLO, ANTHONY

 Address:
 2815 DIRECTORS ROW #500

 City-St-Zip:
 ORLANDO, FL 32809

Title: VP

Name: SHEPPARD, ALAN

Address: 450 S. ORANGE AVENUE, SUITE 650

City-St-Zip: ORLANDO, FL 32801

Title: SEC

Name: GUITAR, JOHN

Address: 8427 SOUTHPARK CIRCLE City-St-Zip: ORLANDO, FL 32819

Title: PE D

Name: MCFADDEN, JEFF

Address: 1560 ORANGE AVENUE, SUITE 410 City-St-Zip: WINTER PARK, FL 32789

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: SHANNON MILLER RA 03/02/2010