2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32635

FILED Jun 07, 2006 Secretary of State

Entity Name: CENTRAL FLORIDA CHAPTER ASSOCIATION OF LEGAL ADMINISTRATORS, INC.

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

485 N. KELLER ROAD 450 S. ORANGE AVENUE

SUITE 401 SUITE 650

MAITLAND, FL 32751 US ORLANDO, FL 32801 US

Current Mailing Address: New Mailing Address:

P.O. BOX 945401 450 SOUTH ORANGE AVENUE

MAITLAND, FL 32794 US SUITE 650
ORLANDO. FL 32801 US

FEI Number: 59-2196408 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JOHNSON, SYDNEY A BARVE, STACEY A

485 N. KELLER ROAD 450 SOUTH ORANGE AVENUE SUITE 401 SUITE 650

MAITLAND, FL 32751 US SUITE 650 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: STACEY A. BARVE 06/07/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VD () Delete Title: PD (X) Change() Addition

 Name:
 BARVE, STACEY
 Name:
 BARVE, STACEY

 Address:
 450 S ORANGE AVE STE 650
 Address:
 450 S ORANGE AVE STE 650

 City-St-Zip:
 ORLANDO, FL 32801 US
 City-St-Zip:
 ORLANDO, FL 32801 US

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 WANGERIN, ELEANOR T
 Name:
 KING, JOHN R

 Address:
 390 N ORANGE AVE STE 1900
 Address:
 215 N. EOLA DRIVE

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ORLANDO, FL 32801

 $\label{eq:title:pd} \textit{Title:} \qquad \textit{PD} \qquad (\) \, \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{VD} \qquad (\textit{X}) \, \textit{Change} \, (\) \, \textit{Addition}$

 Name:
 JOHNSON, SYDNEY A
 Name:
 CORAH, MELISSA

 Address:
 485 N KELLER RD STE 401
 Address:
 807 WEST MORSE BLVD

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 WINTER PARK, FL 32789

Title: SD () Delete Title: SD (X) Change () Addition

Name: RAMBHAROSE, ANJANIE Name: MCFERON, LENITA

Address: 200 S. ORANGE AVE, STE 2300 Address: 301 E. PINE STREET STE 1400

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STACEY A. BARVE PD 06/07/2006