## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N35468

Entity Name: ARCHITECTURAL MANUFACTURERS ASSOCIATION OF FLORIDA, INCORPORATED

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:		
1625 SUMMIT LAKE DRIVI SUITE 300 TALLAHASSEE, FL 32317					
Current Mailing Address	:	New Mailing Address:			
1625 SUMMIT LAKE DRIVI SUITE 300 TALLAHASSEE, FL 32317					
FEI Number: 59-2972885	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:			

WILHELM, RICHARD 1625 SUMMIT LAKE DRIVE SUITE 300 TALLAHASSEE, FL 32317 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:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title:	P () Delete	Title:	() Change () Addition		
Name:	COLE, FREDDIE	Name:			
Address:	2318 WINNUG COLORS	Address:			
City-St-Zip:	SAN ANTONIO, TX 78248	City-St-Zip:			
Title:	D () Delete	Title:	S (X) Change ( ) Addition		
Name:	SCHOTZ, RHONDA	Name:	SCHOTZ, RHONDA		
Address:	1323 SOUTH ELEVENTH AVENUE	Address:	1323 SOUTH ELEVENTH AVENUE		
City-St-Zip:	WAUSAU, WI 54401	City-St-Zip:	WAUSAU, WI 54401		
Title:	S () Delete	Title:	VP (X) Change ( ) Addition		
Name:	LEONARD, KRISTIN	Name:	WESTFALL, MICHAEL		
Address:	2585 FRONT ST	Address:	62845 BOYD ACRES ROAD		
City-St-Zip:	SLIDELL, LA 70458	City-St-Zip:	BEND, OR 97701		
Title:	T () Delete	Title:	T (X) Change ( ) Addition		
Name:	CHAPPELL, DENNIS	Name:	AMORUSO, ROBERT		
Address:	1672 VALLEY DRIVE	Address:	2540 JEWETT LANE		
City-St-Zip:	VENICE, FL 34292	City-St-Zip:	SANFORD, FL 32771		

I hereby certify that the information supplied with this filing does not qualify 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:	FREDDIE COLE	Р	01/04/2008
	Electronic Signature of Signing Officer or Director		Date

FILED Jan 04, 2008 Secretary of State