

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42292

FILED
Jul 09, 2008
Secretary of State

Entity Name: THE SOCIETY OF FINANCIAL SERVICE PROFESSIONALS, JACKSONVILLE CHAPTER, INC.

Current Principal Place of Business:

4110 SOUTHPOINT BLVD
#123
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

4110 SOUTHPOINT BLVD
#123
JACKSONVILLE, FL 32216 US

New Mailing Address:

FEI Number: 59-3052766 **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:

WILKINSON, MARK
4110 SOUTHPOINT BLVD #123
JACKSONVILLE, FL 32216 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: PP () Delete
Name: ISHAM, BOB
Address: P.O. BOX 57413
City-St-Zip: JACKSONVILLE, FL 32241

Title: T () Delete
Name: BROONE, PAUL
Address: 1721 BLANDING BLVD STE 101
City-St-Zip: JACKSONVILLE, FL 32210

Title: P () Delete
Name: WILKINSON, MARK
Address: 4110 SOUTHPOINT BLVD, STE 123
City-St-Zip: JACKSONVILLE, FL 32216

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOUSOU, MICHAEL
Address: 7077 BONNEVAL RD, STE 550
City-St-Zip: JACKSONVILLE, FL 32216

Title: PE (X) Change () Addition
Name: BROONE, PAUL
Address: 1721 BLANDING BLVD STE 101
City-St-Zip: JACKSONVILLE, FL 32210

Title: T (X) Change () Addition
Name: WILKINSON, MARK
Address: 4110 SOUTHPOINT BLVD, STE 123
City-St-Zip: JACKSONVILLE, FL 32216

Title: S () Change (X) Addition
Name: MALTESE, JOSEPH
Address: 3112 ST JOHNS BLUFF RD S
City-St-Zip: JACKSONVILLE, FL 32246

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: MARK WILKINSON

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07/09/2008

Electronic Signature of Signing Officer or Director

Date