

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42292

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** SOCIETY OF FINANCIAL SERVICE PROFESSIONALS, NORTHEAST FLORIDA 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: P ( ) Delete  
Name: SOUSOU, MICHAEL  
Address: 7077 BONNEVAL RD, STE 550  
City-St-Zip: JACKSONVILLE, FL 32216

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PE (X) Change ( ) Addition  
Name: WORDELL, MICHELLE  
Address: 1301 RIVERPLACE BLVD #2540  
City-St-Zip: JACKSONVILLE, FL 32207

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

T

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date