2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44014

FORT LAUDERDALE, FL 33309

FILED Mar 29, 2010 Secretary of State

Entity Name: SOUTH FLORIDA CHAPTER OF THE FLORIDA ASSOCIATION OF ENVIRONMENTAL

PROFESSIONALS, INC.

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

3125 WEST COMMERCIAL BOULEVARD 901 PONCE DE LEON BOULEVARD **SUITE #130**

SUITE #900 MIAMI, FL 33134

Current Mailing Address: New Mailing Address:

P.O. BOX 011348 MIAMI, FL 33101

FEI Number: 65-0279511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

NEUGAARD, ERIK MARCUS, JEFFRY

901 PONĆE DE LEON BOULEVARD 3125 WEST COMMERCIAL BOULEVARD

SUITE #130 SUITE #900

FORT LAUDERDALE, FL 33309 US MIAMI, FL 33134 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: JEFFRY MARCUS 03/29/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

MARCUS, JEFFRY Name:

Address: 901 PONCE DE LEON BOULEVARD, SUITE #900

City-St-Zip: MIAMI, FL 33134

Title:

Name: CARTER, NICOLE

Address: 901 PONCE DE LEON BOULEVARD, SUITE #900

City-St-Zip: MIAMI, FL 33134

Title: VΡ

WALTERS, SANDRA Name: Address: 6410 FIFTH ST, SUITE 3 City-St-Zip: KEY WEST, FL 33040

Title:

Name: MITCHELL, MATT

2300 WEST SAMPLE ROAD, SUITE #307 Address:

City-St-Zip: POMPANO BEACH, FL 33073

Title:

Name: CARTER, KEVIN 3301 GUN CLUB ROAD Address: WEST PALM BEACH, FL 33406 City-St-Zip:

Title:

NEUGAARD, ERIK Name:

Address: 3125 WEST COMMERCIAL BOULEVARD, SUITE #130

FORT LAUDERDALE, FL 33309 City-St-Zip:

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: NICOLE CARTER T 03/29/2010