2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46847

FILED Apr 23, 2009 Secretary of State

Entity Name: FLORIDA STATE CRB CHAPTER, INC.

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

9108 US HIGHWAY 19 PORT RICHEY, FL 34668

Current Mailing Address: New Mailing Address:

9108 US HIGHWAY 19 PORT RICHEY, FL 34668

FEI Number: 59-3098978 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:

NEIMAN, LAURIE 9108 US HIGHWAY 19 PORT RICHEY, FL 34668 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:

Floring Complete of Decision of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BALLARINO, JOSEPH
 Name:
 LUDWIG, LOUIS

 Address:
 10001 TAMIAMI TRAIL N.
 Address:
 20801 RAMITA TRAIL

 City-St-Zip:
 NAPLES, FL 34108
 City-St-Zip:
 BOCA RATON, FL 33433

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

 Name:
 GAINES, JEFF
 Name:
 NEIMAN, LAURIE

 Address:
 1211 E. BROWARD BLVD.
 Address:
 9108 U.S. HWY 19

 City-St-Zip:
 FT. LAUDERDALE, FL 33301
 City-St-Zip:
 PORT RICHEY, FL 34668

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

Name: NEIMAN, LAURIE Name: BRONSTEIN, BILL

 Address:
 8106 US HWY 19
 Address:
 1192 EAST NEWPORT CENTER DR., STE 220

 City-St-Zip:
 PORT RICHEY, FL 34668
 City-St-Zip:
 DEERFIELD BEACH, FL 33442

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

 Name:
 LUDWIG, LOUIS
 Name:
 WILLETT, HARRY

 Address:
 20801 RAMITA TRAIL
 Address:
 5177 MARINER BLVD

 City-St-Zip:
 BOCA RATON, FL 33433
 City-St-Zip:
 SPRING HILL, FL 34609

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: LAURIE NEIMAN VP 04/23/2009