## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47899

FILED Jan 06, 2008 Secretary of State

Entity Name: THE FLORIDA CHAPTER OF THE MARKETING RESEARCH ASSOCIATION, INC.

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

1061 EAST INDIANTOWN ROAD SUITE 300 JUPITER, FL 33477

**New Mailing Address: Current Mailing Address:** 

909 9TH COURT

PALM BEACH GARDENS, FL 33410 US

FEI Number: 59-3116150 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:

STEPHENSON, KIM 909 9TH COURT

PALM BEACH GARDENS, FL 33410 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:

City-St-Zip:

Date

City-St-Zip:

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition WILLIAMS, ASHAKI ALTSCHUL, GARY Name: Name:

2525 DRANE FIELD RD STE 15 Address: 1415 W CYPRESS CREEK RD Address: City-St-Zip: LAKELAND, FL 33811 City-St-Zip: FORT LAUDERDALE, FL 33309

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

BLACKWELL, PAT Name: ULRICH, NANCY Name: Address: 1428 E SEIMEN BLVD STE 104 Address: 1329 KINGSLEY AVENUE, SUITE A

City-St-Zip: APOPKA, FL 32703 City-St-Zip: ORANGE PARK, FL 32073

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

ALTSCHUI, GARY CARSON, RANDY Name: Name:

1415 W CYPRESS CREEK RD 5027 WEST LAUREL STREET Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: TAMPA, FL 33607

Title: () Delete Title: () Change () Addition

Name: STEPHENSON, KIM Name: 909 9TH COURT Address: Address:

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

COPELAND, HANK Name: Name: 631 US HWY 1 STE 406 Address: Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip:

PALM BEACH GARDENS, FL 33410

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: KIM STEPHENSON S 01/06/2008