

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50207

FILED
Feb 08, 2010
Secretary of State

Entity Name: ATTORNEYS' BAR ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

516 DOUGLAS AVENUE
SUITE 1106
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

PO BOX 162967
ALTAMONTE SPRINGS, FL 327162967

New Mailing Address:

FEI Number: 59-3142621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALPER, HARVEY M.
516 DOUGLAS AVENUE
SUITE 1106
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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: DP
Name: ALPER, HARVEY M.
Address: 516 DOUGLAS AVENUE, SUITE 1106
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D
Name: LITTLE, JOSEPH
Address: 3731 N.W. 13TH PLACE
City-St-Zip: GAINESVILLE, FL

Title: STV
Name: LITTLE, JOSEPH
Address: 3731 N.W. 13TH PLACE
City-St-Zip: GAINESVILLE, FL

Title: D
Name: TRAWICK, HENRY P J
Address: 2051 MAIN STREET
City-St-Zip: SARASOTA, FL

Title: D
Name: MURPHY, WILL
Address: 4770 BISCAYNE BLVD, STE 960
City-St-Zip: MIAMI, FL

Title: D
Name: HENDRICKS, JANE E
Address: PMB 117 8306 MILLS DRIVE
City-St-Zip: MIAMI, FL 33183

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: HARVEY M. ALPER

DP

02/08/2010

Electronic Signature of Signing Officer or Director

Date