

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004275

FILED
Jan 09, 2012
Secretary of State

Entity Name: ASSOCIATION OF FUNDRAISING PROFESSIONALS WEST FLORIDA CHAPTER, INC.

Current Principal Place of Business:

C/O UNITED WAY OF ESCAMBIA COUNTY
1301 W GOVERNMENT ST
PENSACOLA, FL 32502 US

New Principal Place of Business:

C/O LAVERNE BAKER & ASSOCIATES
84 BYABRIDGE
GULF BREEZE, FL 32561 US

Current Mailing Address:

AFP WEST FLORIDA CHAPTER
P O BOX 9858
PENSACOLA, FL 32513 US

New Mailing Address:

FEI Number: 59-3139669 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DENSON, RONALD L
1301 W GOVERNMENT ST
PENSACOLA, FL 32502 US

Name and Address of New Registered Agent:

BAKER, LAVERNE L
84 BAYBRIDGE
GULF BREEZE, FL 32561 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: LAVERNE BAKER

01/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PPD
Name: DENSON, RONALD L
Address: 1301 W GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32502 US

Title: VPD
Name: ALLEN, NIGEL
Address: 5015 9TH AVENUE
City-St-Zip: PENSACOLA, FL 32504 US

Title: PD
Name: WHITTEN, PATRICE S CFRE
Address: 1000 COLLEGE BLVD
City-St-Zip: PENSACOLA, FL 32503 US

Title: VP
Name: SAMMIS, ERIN
Address: PO BOX 9858
City-St-Zip: PENSACOLA, FL 32513 US

Title: SD
Name: HEMBROUGH, KENDA
Address: 11000 UNIVERSITY PARKWAY
City-St-Zip: PENSACOLA, FL 32514 US

Title: TD
Name: BAKER, LAVERNE
Address: PO BOX 9858
City-St-Zip: PENSACOLA, FL 32513 US

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: LAVERNE BAKER

TD

01/09/2012

Electronic Signature of Signing Officer or Director

Date