

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000273

FILED
Apr 14, 2010
Secretary of State

Entity Name: SOCIETY OF HOSTS, INC.

Current Principal Place of Business:

288 CHAMPIONS WAY
UCB4107, FSU
TALLAHASSEE, FL 323062541 US

New Principal Place of Business:

Current Mailing Address:

288 CHAMPIONS WAY
UCB4107, FSU
TALLAHASSEE, FL 323062541 US

New Mailing Address:

FEI Number: 59-3285467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OHLIN, JANE
2843 FITZPATRICK DRIVE
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

MONNIER, PAMELA
6563 MAN O WAR TRL
TALLAHASSEE, FL 32309 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: PAMELA MONNIER

04/14/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: BURR, CHRIS
Address: 1241 ADAMS STREET
City-St-Zip: BOSTON, MA 02124

Title: DV
Name: BUDZIUS, JANINE M
Address: 717 TORY LANE
City-St-Zip: PHOENIXVILLE, PA 19035 US

Title: DS
Name: MONNIER, PAMELA I
Address: 6563 MAN O WAR TRL
City-St-Zip: TALLAHASSEE, FL 32309

Title: DT
Name: WILLIAMS, DAVID
Address: 11670 CR 207W
City-St-Zip: OXFORD, FL 34484

Title: D
Name: BRYMER, BOB
Address: 1 CHAMPIONS WAY, STE 4100, FSU
City-St-Zip: TALLAHASSEE, FL 323062541 US

Title: D
Name: O'HARA, JEFFREY
Address: 1216 LOUISIANA AVENUE
City-St-Zip: NEW ORLEANS, LA 70115

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: PAMELA MONNIER

DIR.

04/14/2010

Electronic Signature of Signing Officer or Director

Date