

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000965

FILED
Feb 07, 2011
Secretary of State

Entity Name: THE ASSOCIATION OF BLACK PSYCHOLOGISTS SOUTH FLORIDA CHAPTER, INCORPORATED

Current Principal Place of Business:

10430 SW 183 STREET
MIAMI, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12971
MIAMI, FL 331012971 US

New Mailing Address:

FEI Number: 65-0821922 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOLMES, DOROTHYA
10430 SW 183 ST.
MIAMI, FL 33157 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: P
Name: ROBERTSON, ISHAJI
Address: 400 SOUTH DIXIE HIGHWAY
City-St-Zip: HALLANDALE, FL 33009

Title: VD
Name: SAWYER, ROBERT
Address: 11011 SW 156 STREET
City-St-Zip: MIAMI, FL 33157

Title: SD
Name: BOURSQUOT, MARIE
Address: 8272 BERMUDA SOUND WAY
City-St-Zip: BOYNTON BEACH, FL 33436

Title: T
Name: HOLMES, DOROTHY A
Address: 10430 SW 183 STREET
City-St-Zip: MIAMI, FL 33157

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: DOROTHY A. HOLMES

T

02/07/2011

Electronic Signature of Signing Officer or Director

Date