

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2008 8:00 am
Secretary of State

01-10-2008 90009 040 ****61.25

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1. Entity Name
FLORIDA FACILITY MANAGERS ASSOCIATION, INC.



Principal Place of Business
4431 S.W. 101 DRIVE
GAINESVILLE, FL 32608

Mailing Address
4431 S.W. 101 DRIVE
GAINESVILLE, FL 32608

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-3588206

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MALANEY, WAYNE R
2610 S HANNON HILL DR
TALLAHASSEE, FL 32309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when remaining)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME DUBAY, LIONEL
STREET ADDRESS BOX 115850
CITY-STATE-ZIP GAINESVILLE, FL 32611 ☒ Delete

TITLE VP
NAME HAMILTON, RICK
STREET ADDRESS 101 N. ATLANTIC AVENUE
CITY-STATE-ZIP DAYTONA BEACH, FL 32115 ☐ Delete

TITLE ST VP
NAME FARRELL, MICKEY
STREET ADDRESS 4201 N. DALE MABRY
CITY-STATE-ZIP TAMPA, FL 33607 ☐ Delete

TITLE D
NAME BENSEL, MARY
STREET ADDRESS 8099 COLLIER PKY S.W.
CITY-STATE-ZIP FORT MYERS, FL 33919 ☒ Delete

TITLE D
NAME LAPAN, MIKE
STREET ADDRESS 701 W. LIME STREET
CITY-STATE-ZIP LAKELAND, FL 33815 ☐ Delete

TITLE D
NAME ENGLERT, ROGER
STREET ADDRESS 505 W. PENSACOLA
CITY-STATE-ZIP TALLAHASSEE, FL 32301 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III 10

TITLE ST
NAME Judy Joseph
STREET ADDRESS 1010 N MacInnes Place
CITY-STATE-ZIP TAMPA FL 33602 ☐ Change ☒ Addition

TITLE D
NAME Allen Johnson
STREET ADDRESS 600 W. Amalia St
CITY-STATE-ZIP Orlando FL 32801 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Chase W. W...
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Division/Function