

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002624

FILED  
Feb 21, 2012  
Secretary of State

**Entity Name:** FLORIDA FACILITY MANAGERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4431 S.W. 101ST DR.  
GAINESVILLE, FL 32608

**New Principal Place of Business:**

**Current Mailing Address:**

4431 S.W. 101ST DR.  
GAINESVILLE, FL 32608

**New Mailing Address:**

**FEI Number:** 59-3588206

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MALANEY, WAYNE R  
2610 S HANNON HILL DR  
TALLAHASSEE, FL 32309 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: JOSEPH, JUDY  
Address: 1010 N MACINNES PL  
City-St-Zip: TAMPA, FL 33602

Title: VP  
Name: STONE, KIM  
Address: 601 BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 33130

Title: ST  
Name: ROSE, RUNDLE  
Address: PO BOX 9204  
City-St-Zip: FT MYERS, FL 33902

Title: D  
Name: FARRELL, MICKEY  
Address: 4201 N DALE MABRY  
City-St-Zip: TAMPA, FL 33607

Title: D  
Name: BENSEL, MARY  
Address: 777 N TAMiami TRAIL  
City-St-Zip: SARASOTA, FL 34236

Title: D  
Name: JOHNSON, ALLEN  
Address: 600 W AMELIA  
City-St-Zip: ORLANDO, FL 32801

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:** CHERIE DUBAY

ED

02/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date