

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000847

FILED
Feb 26, 2008
Secretary of State

Entity Name: CASE MANAGEMENT SOCIETY OF FLORIDA NORTHEAST FLORIDA CHAPTER, INC.

Current Principal Place of Business:

5011 GATE PKWY
BLDG 100 SUITE 400
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

PO BOX 10906
JACKSONVILLE, FL 322470906

New Mailing Address:

FEI Number: 65-0544190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, DIANNE
7574 SCARLET IBIS LN
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

MILLER, DIANNE
4296 EDGEWATER CROSSING DR.
JACKSONVILLE, FL 32257 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:

02/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOOTH, SUE L
Address: 5321 RESSIE DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: S () Delete
Name: MROZ, KATHY
Address: 2525 BEAUTY BERRY CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32246

Title: T () Delete
Name: MILLER, DIANNE
Address: 4296 EDGEWATER CROSSING DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MILLER, DIANNE J
Address: 4296 EDGEWATER CROSSING DR.
City-St-Zip: JACKSONVILLE, FL 32257

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CANADAY, JANET
Address: 2099 WINTERBOURNE E. #306
City-St-Zip: ORANGE PARK, FL 32073

Title: VP () Change (X) Addition
Name: HARE, HEIDI
Address: 117 SOLANSO CAY CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DIANNE J. MILLER

P

02/26/2008

Electronic Signature of Signing Officer or Director

Date