

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000847

FILED
Apr 27, 2010
Secretary of State

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

Current Principal Place of Business:

4800 DEERWOOD CAMPUS PARKWAY
BLDG 900, 5TH FLOOR
JACKSONVILLE, FL 32246

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 MRS.
4296 EDGEWATER CROSSING DR.
JACKSONVILLE, FL 32257 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: MILLER, DIANNE MS.
Address: 4296 EDGEWATER CROSSING DR
City-St-Zip: JACKSONVILLE, FL 32257

Title: S
Name: STORER, LINDA MS.
Address: 237 CRANE'S LAKE DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T
Name: DOTSON, SHERRY MRS.
Address: 8663 SANCHEZ RD.
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP
Name: MURPHY, BERNICE
Address: 337 SW GODBOLD AVE.
City-St-Zip: LAKE CITY, FL 32024

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: DIANNE MILLER

P

04/27/2010

Electronic Signature of Signing Officer or Director

Date