

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003489

FILED
Mar 10, 2009
Secretary of State

Entity Name: FLORIDA CAPITAL CHAPTER ASSOCIATION OF LEGAL ADMINISTRATORS, INC.

Current Principal Place of Business:

3065 HIGHLAND OAKS TERRACE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

3065 HIGHLAND OAKS TERRACE
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-3157693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSMITH, LESLIE
3065 HIGHLAND OAKS TERRACE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

THOMAS, LESLIE
3065 HIGHLAND OAKS TERRACE
TALLAHASSEE, FL 32301 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: LESLIE THOMAS

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: DUNN, DONALD M
Address: 651 E JEFFERSON ST
City-St-Zip: TALLAHASSEE, FL 32399 US

Title: T () Delete
Name: GOLDSMITH, LESLIE
Address: 3065 HIGHLAND OAKS TERRACE
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: VP () Delete
Name: JEWETT, DERON
Address: 1319 THOMASWOOD DR
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: P () Delete
Name: CHIN, PATRICIA
Address: 215 S. MONROE ST, 2ND FL
City-St-Zip: TALLAHASSEE, FL 32301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: THOMAS, LESLIE
Address: 3065 HIGHLAND OAKS TERRACE
City-St-Zip: TALLAHASSEE, FL 32301 US

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

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

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: PATRICIA CHIN

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date