

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003716

FILED
Feb 02, 2009
Secretary of State

Entity Name: ISPI INCORPORATED-SOUTH FLORIDA GOLD COAST CHAPTER

Current Principal Place of Business:

1505 LAKEVIEW CIRCLE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

1505 LAKEVIEW CIRCLE
CORAL SPRINGS, FL 33071 US

New Mailing Address:

FEI Number: 59-2687131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMPKINS, GERRY E
1505 LAKEVIEW CIRCLE
CORAL SPRINGS, FL 33071 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: TREA () Delete
Name: TOMPKINS, GERRY E
Address: 1505 LAKEVIEW CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: SECY () Delete
Name: OLIVA, SUSAN
Address: 8949 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33322 US

Title: PROG () Delete
Name: HUNTER, CLARA
Address: 1120 NE 205TH TERRACE
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: MKTG () Delete
Name: SMITH, STARLETTE
Address: 2011 WINNERS CIRCLE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: MBSP () Delete
Name: O'CONNELL, ANDREA
Address: 4610 W. MCNAB ROAD, UNIT B-1
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: PRES () Delete
Name: OLIVA, SUSAN
Address: 8949 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33322 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: GERRY E TOMPKINS

TREA

02/02/2009

Electronic Signature of Signing Officer or Director

Date