2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006348

FILED Aug 29, 2007 Secretary of State

Entity Name: COLLEGE AND UNIVERSITY PERSONNEL ASSOCIATION, FLORIDA CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

ROLLINS COLLGE 1000 HOLT AVE 2718

WINTER PARK, FL 32789 US

New Mailing Address: Current Mailing Address:

ROLLINS COLLGE ROLLINS COLLEGE 1000 HOLT AVE 2718 100 HOLT AVE. 2718 WINTER PARK, FL 32789 US WINTER PARK, FL 32789

FEI Number: 59-3267263 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JONES, LAURIE MCREYNOLDS, IRENE 5954 BÁY VISTA DRIVE 600 S. CLYDE MORRIS BLVD. PENSACOLA, FL 32507 HUMAN RESOURCES US DAYTONA BEACH, FL 32114 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: IRENE MCREYNOLDS 08/29/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

(X) Change () Addition () Delete FAIRFAX, PAM GOODLETT, KAREN Name: Name:

EDISON COLLEGE 8099 COLLEGE PKWY SW Address: FSU 6200 UNVIERSITY CENTER Address: City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: TALLAHASSEE, FL 32306 US

(X) Change () Addition Title: () Delete Title: GOODLETT, KAREN Name: WILLIAMS, JAMES Name:

Address: FSU 6200 UNIVER CENTER Address: 2800 UNIVERSITY BLVD. City-St-Zip: TALLAHASSEE, FL 32306 City-St-Zip: JACKSONVILLE, FL 32306 US

Title: () Delete Title: (X) Change () Addition JONES, LAURIE MCREYNOLDS, IRENE Name: Name:

5954 BAY VISTA DR ERAU, 600 S. CLYDE MORRIS BLVD. Address: Address:

City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: () Delete Title: (X) Change () Addition

Name: WILLIAMS, JAMES Name: LIEBLONG, LINDA Address:

2800 UNIVERSITY BLVD FSU, 6200 UNIVERSITY CENTER Address: JACKSONVILLE, FL City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32306 US

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: IRENE MCREYNOLDS Т 08/29/2007