

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004888

FILED
Apr 16, 2009
Secretary of State

Entity Name: FARPM, THE FLORIDA ASSOCIATION OF RESIDENTIAL PROPERTY MANAGERS, INC.

Current Principal Place of Business:

659 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

1250 W. SR 434
SUITE 1016
LONGWOOD, FL 32750

Current Mailing Address:

659 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

1250 W. SR 434
SUITE 1016
LONGWOOD, FL 32750

FEI Number: 59-3512309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, GENE D
659 MAITLAND AVE
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

BENNETT, GENE D
1250 W. SR 434
SUITE 1016
LONGWOOD, FL 32750 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: GENE D. BENNETT

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: BENNETT, GENE D
Address: 659 MAITLAND AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: V/D (X) Delete
Name: MONCLA, GAIL A
Address: 659 MAITLAND AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: BENNETT, GENE D
Address: 1250 W. SR 434, SUITE 1016
City-St-Zip: LONGWOOD, FL 32750 US

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: GENE D. BENNETT

PDST

04/16/2009

Electronic Signature of Signing Officer or Director

Date