

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000004888

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

1250 W. SR 434  
SUITE 1016  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

1250 W. SR 434  
SUITE 1016  
LONGWOOD, FL 32750

**New Mailing Address:**

**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  
1250 W. SR 434  
SUITE 1016  
LONGWOOD, FL 32750 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/D  
Name: BENNETT, GENE D  
Address: 1250 W. SR 434, SUITE 1016  
City-St-Zip: LONGWOOD, FL 32750 US

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: GENE D. BENNETT

PRE

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date