

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004062

FILED
Mar 23, 2006
Secretary of State

Entity Name: FLORIDA CHAPTER OF THE URBAN AND REGIONAL INFORMATION SYSTEMS ASSOCIATION, INC.

Current Principal Place of Business:

1597 62ND AVENUE NORTH
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

1597 62ND AVENUE NORTH
ST. PETERSBURG, FL 33702

New Mailing Address:

FEI Number: 65-0879737

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEANE, WILLIAM W
1597 62ND AVENUE NORTH
ST. PETERSBURG, FL 33702 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: SD () Delete
Name: LOVETT, MICHAEL
Address: 2301 MAITLAND CENTER PKWY, ST 300
City-St-Zip: MAITLAND, FL 32751

Title: PD () Delete
Name: GANDHI, SANJIV
Address: PO BOX 4990
City-St-Zip: ORLANDO, FL 328024990

Title: TD () Delete
Name: WALTER, WILLIAM
Address: 123 W. INDIANA AVE
City-St-Zip: DELAND, FL 32720

Title: VD () Delete
Name: ANDERSON, PENNY
Address: 301 N OLIVE AVE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: HARTSFIELD, LEE
Address: 301 S. MONROE ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: GARVEY, BRIAN
Address: 6500 ALL AMERICAN BLVD
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOVETT, MICHAEL
Address: 2301 MAITLAND CENTER PKWY, ST 300
City-St-Zip: MAITLAND, FL 32751

Title: SD (X) Change () Addition
Name: KURA, EDWARD
Address: 2301 MAITLAND CENTER PKWY, ST300
City-St-Zip: MAITLAND, FL 32751

Title: TD (X) Change () Addition
Name: WALTER, WILLIAM
Address: 1364 HAMLET AV
City-St-Zip: CLEARWATER, FL 33756

Title: VD (X) Change () Addition
Name: BORRIES, JOSEPH
Address: 509 EAST AV
City-St-Zip: CLEARWATER, FL 33756

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 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: WILLIAM E. WALTER

TD

03/23/2006

Electronic Signature of Signing Officer or Director

Date