

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003467

FILED
Feb 15, 2008
Secretary of State

Entity Name: CONSTRUCTION FINANCIAL MANAGEMENT ASSOCIATION OF CENTRAL FLORIDA, INCORPORATED

Current Principal Place of Business:

2301 SILVER STAR RD.
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

2301 SILVER STAR RD.
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-3571348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOWERY, JANICE
2301 SILVER STAR ROAD
ORLANDO, FL 32804 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: TD () Delete
Name: ALFONZO, HEATHER
Address: 2301 SILVER STAR ROAD
City-St-Zip: ORLANDO, FL 32804

Title: SD () Delete
Name: LISA, GLASS
Address: 2418 SILVER STAR ROAD
City-St-Zip: ORLANDO, FL 32804

Title: PD () Delete
Name: LOWERY, JANICE
Address: 2301 SILVER STAR ROAD
City-St-Zip: ORLANDO, FL 32804

Title: VPD () Delete
Name: DAVID, DAPORE
Address: 2301 SILVER STAR ROAD
City-St-Zip: ORLANDO, FL 32804

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:

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: JANICE LOWERY

PRES

02/15/2008

Electronic Signature of Signing Officer or Director

Date