2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2008
Secretary of State

DOCUMENT# 706811

Entity Name: CENTRAL FLORIDA FIRE CHIEFS ASSOCIATION INC.

Current Principal Place of Business:

315 W. MAIN STREET
SUITE 411
TAVARES, FL 32778 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 547894
ORLANDO, FL 32854 US

New Mailing Address:

FEI Number: 59-2901635 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FOWLER, JAMES A ATTY
28 W CENTRAL BLVD
ORLANDO, FL 32801 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:	ST	( ) Delete
Name:	GASTON, GEORGE S	
Address:	315 W. MAIN STREET, SUITE #411	
City-St-Zip:	TAVARES, FL 32778	
Title:	P	( ) Delete
Name:	WILLIAMSON, JOHN	
Address:	131 EAST PALMETTO STREET	
City-St-Zip:	WINTER GARDEN, FL 34787	
Title:	V	( ) Delete
Name:	WHITE, JAMES	
Address:	343 WEST CANTON AVENUE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	D	( ) Delete
Name:	REYNOLDS, JAMES	
Address:	400 SOUTH ORANGE AVENUE	
City-St-Zip:	ORLANDO, FL 32801	
Title:	D	( ) Delete
Name:	KING, ROBERT	
Address:	200 WEST DAKIN AVENUE	
City-St-Zip:	KISSIMMEE, FL 34744	
Title:	D	( ) Delete
Name:	RANSOM, GERARD	
Address:	1303 S. FRENCH AVE.	
City-St-Zip:	SANFORD, FL 32771	

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:	
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: GEORGE S. GASTON ST 03/04/2008

Electronic Signature of Signing Officer or Director — Date