2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2008
Secretary of State

DOCUMENT# 707025

Entity Name: THE FLORIDA STATE DEMOLAY ASSOCIATION, INC.

Current Principal Place of Business:

12354 44TH STREET N
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2079
PALMETTO, FL 34220 US

New Mailing Address:

FEI Number: 59-1271058 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WARDELL, W G
11355 ERIE ROAD
PARRISH, FL 34219 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:	PD	( ) Delete
Name:	MARTI, WILLIAM A	
Address:	5509 VANBUREN STREET	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	D	( ) Delete
Name:	LYNN, RICHARD	
Address:	4821 SW 188TH AVENUE	
City-St-Zip:	SW RANCHES, FL 33332	
Title:	TD	( ) Delete
Name:	WARDELL, W. GORDON	
Address:	11355 ERIE ROAD	
City-St-Zip:	PARRISH, FL 34219	
Title:	D	( ) Delete
Name:	HUNT, G LAWRENCE	
Address:	880 OLEANDER WAY SOUTH	
City-St-Zip:	ST. PETERSBURG, FL 33707	
Title:	VPD	( ) Delete
Name:	GLENDINNING, RUSSELL B	
Address:	4496 GOLDEN LAKE DRIVE	
City-St-Zip:	SARASOTA, FL 34233	
Title:	TD	( ) Delete
Name:	LEVAN, CHARLES M	
Address:	164 NIGHTINGALE CIRCLE	
City-St-Zip:	ELLENTON, FL 34222	

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: W. GORDON WARDELL TD 06/09/2008
Electronic Signature of Signing Officer or Director — Date