2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#730160

FILED Apr 05, 2007 Secretary of State

Entity Name: THE FLORIDA MOTION PICTURE & TELEVISION ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

764 MARYLAND AVE 807 WARREN AVE WINTER PARK, FL 32789 US COCOA, FL 32922

Current Mailing Address: New Mailing Address:

210 NORTH PINE DRIVE TAMPA, FL 33613

FEI Number: 59-2301231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CALDWELL, LEORA 210 NORTH PINE DRIVE TAMPA, FL 33613

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

(X) Change () Addition () Delete DUPONT, SCOTT FERRILL, CAROLE A PRES Name: Name: 764 MARYLAND AVE Address: 807 WARREN AVE Address:

City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: COCOA, FL 32922 US

Title: () Delete Title: (X) Change () Addition HALLIBURTON, CAROL V PRES Name: GOODSPEED, MIRIAM EV PRES Name: Address: 4388-D LAKE UNDERHILL Address: 392 LAKEVIEW DRIVE City-St-Zip: ORLANDO, FL 32803 US City-St-Zip: PALM HARBOR, FL 34683 US

Title: () Delete Title: **VPD** (X) Change () Addition CALDWELL, LEORA SERENTI, NICHOLAS VP Name: Name:

210 NORTH PINE DRIVE Address: Address: P.O. BOX 760

City-St-Zip: TAMPA, FL 33613 US City-St-Zip: WELLBORN, FL 32094 US

(X) Change () Addition Title: **EVPD** () Delete Title: SD

Name: MCDONALD, DEAN Name: COBB, CAROLYN SEC Address: 2550 WOODHAVEN CT Address: 2953 HOLLY ROAD

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: ORANGE PARK, FL 32065

Title: () Delete Title: () Change (X) Addition CALDWELL, LEORA TREAS Name: Name: 210 NORTH PINE DRIVE Address:

Address: City-St-Zip: City-St-Zip: TAMPA, FL 33613

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: CAROLE A. FERRILL PD 04/05/2007