

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730160

FILED  
Apr 21, 2008  
Secretary of State

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

**Current Principal Place of Business:**

807 WARREN AVE  
COCOA, FL 32922 US

**New Principal Place of Business:**

**Current Mailing Address:**

210 NORTH PINE DRIVE  
TAMPA, FL 33613 US

**New Mailing Address:**

FEI Number: 59-2301231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CALDWELL, LEORA  
210 NORTH PINE DRIVE  
TAMPA, FL 33613 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: FERRILL, CAROLE A PRES  
Address: 807 WARREN AVE  
City-St-Zip: COCOA, FL 32922 US

Title: EVPD ( ) Delete  
Name: GOODSPEED, MIRIAM EV PRES  
Address: 392 LAKEVIEW DRIVE  
City-St-Zip: PALM HARBOR, FL 34683 US

Title: VPD ( ) Delete  
Name: SERENTI, NICHOLAS VP  
Address: P.O. BOX 760  
City-St-Zip: WELLBORN, FL 32094 US

Title: SD ( ) Delete  
Name: COBB, CAROLYN SEC  
Address: 2953 HOLLY ROAD  
City-St-Zip: ORANGE PARK, FL 32065

Title: TD ( ) Delete  
Name: CALDWELL, LEORA TREAS  
Address: 210 NORTH PINE DRIVE  
City-St-Zip: TAMPA, FL 33613

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: SAIA, MIKKI VP  
Address: P.O. BOX 93085  
City-St-Zip: LAKELAND, FL 33804 US

Title: SD (X) Change ( ) Addition  
Name: WILLIAMS, BILL SEC  
Address: 4450 WEST EAU GALLIE BLVD., STE 220  
City-St-Zip: MELBOURNE, FL 32934

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: CAROLE A FERRILL

PRES

04/21/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date