

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730331

FILED
May 01, 2009
Secretary of State

Entity Name: ASSOCIATED INDUSTRIES OF FLORIDA POLITICAL ACTION COMMITTEE, INC.

Current Principal Place of Business:

516 N. ADAMS STREET
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PO BOX 10085
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 59-1541669 **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:

BISHOP, BARNEY T III
516 NORTH ADAMS STREET
TALLAHASSEE, FL 32302 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: C () Delete
Name: BAILEY, DOUG
Address: 106 EAST COLLEGE AVE. STE 700
City-St-Zip: TALLAHASSEE, FL 32301

Title: TD () Delete
Name: MCRAE, ROBERT D
Address: 516 N ADAMS
City-St-Zip: TALLAHASSEE, FL 32301

Title: PS () Delete
Name: BISHOP, BARNEY T III
Address: 516 N. ADAMS ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: HINSON, CHARLES O III
Address: 106 E. COLLEGE AVENUE, SUITE 630
City-St-Zip: TALLAHASSEE, FL 32301

Title: VC () Delete
Name: WAYNE, DAVIS T
Address: 1910 SAN MARCO BLVD
City-St-Zip: JACKSONVILLE, FL 32207

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: VC (X) Change () Addition
Name: HUNTER, WILLIAM
Address: 307 WEST PARK AVENUE, SUITE 124
City-St-Zip: TALLAHASSEE, FL 32301

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: BARNEY T. BISHOP III

PS

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date