

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730402

FILED
Apr 23, 2009
Secretary of State

Entity Name: FLORIDA PUBLIC TRANSPORTATION ASSOCIATION, INC.

Current Principal Place of Business:

2003 PARKWAY BLDG. -
102
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

FLORIDA PUBLIC TRANSPORTATION ASSN.
P O BOX 10168
TALLAHASSEE, FL 32302 US

New Mailing Address:

FEI Number: 59-1766032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, JOHN W ED
2003 APALACHEE PKWY
102
TALLAHASSEE, FL 32301 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: VCHR () Delete
Name: COHEN, CHUCK
Address: 3201 ELECTRONICS WAY
City-St-Zip: WPB, FL 33407

Title: CHR () Delete
Name: MYERS, STEVE
Address: 6035 LANDING VIEW RD
City-St-Zip: FT. MYERS, FL 33907

Title: ED () Delete
Name: WATSON, JOHN W.
Address: 2003 APALACHEE PKWY-102
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHR (X) Change () Addition
Name: COHEN, CHUCK
Address: 3201 ELECTRONICS WAY
City-St-Zip: WPB, FL 33407

Title: PCHR (X) Change () Addition
Name: MYERS, STEVE
Address: 6035 LANDING VIEW RD
City-St-Zip: FT. MYERS, FL 33907

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: WES WATSON

ED

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date