

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737251

FILED
Jun 08, 2005
Secretary of State

Entity Name: FLORIDA LARYNGECTOMEE'S ASSOCIATION, INC.

Current Principal Place of Business:

F.L.A. C/O AMERICAN CANCER SOCIETY
3709 W JETTON AVE
TAMPA, FL 336295146 US

New Principal Place of Business:

Current Mailing Address:

141 ELEUTHRA DRIVE
DANIA, FL 33004 US

New Mailing Address:

FEI Number: 59-2330591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

MOGK, EARL C
141 ELEUTHERA DRIVE
DANIA, FL 33004 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: RAMBOLDT, JUDITH
Address: 2640 DERBY DR
City-St-Zip: DELTONA, FL 32738

Title: VD () Delete
Name: KILMER, CARL
Address: 114 WIMBLEDON DR
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: SD () Delete
Name: KIGER, AMY JO
Address: 22 TROTTER CT
City-St-Zip: DAYTONA BEACH, FL

Title: TD (X) Delete
Name: MOGK, EARL C
Address: 141 ELEUTHRA DRIVE
City-St-Zip: DANIA, FL 33004

Title: D () Delete
Name: HOUGH, JERRY
Address: 1480 PHESANT CREEK DR
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: NAIL, CHARLIE
Address: 3895 SW WHISPERING SOUND DRIVE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KILMER, CARL
Address: 114 WIMBLEDON DR.
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: SD (X) Change () Addition
Name: KIGER, AMY JO
Address: 22 TROTTER CT.
City-St-Zip: DAYTONA BEACH, FL

Title: TD (X) Change () Addition
Name: MOGK, EARL C
Address: 141 ELEUTHERA DRIVE
City-St-Zip: DANIA BEACH, FL 33004

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

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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 for the exemption stated in Section 119.07(3)(i), 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: EARL C. MOGK

TREA

06/08/2005

Electronic Signature of Signing Officer or Director

Date