2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00080

FILED May 02, 2007 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF VOLUNTEER CENTERS, INC.

Current Principal Place of Business: New Principal Place of Business: 918 RAILROAD AVENUE 1888 BROTHER GEENEN WAY TALLAHASSEE, FL 32310 SARASOTA, FL 34236 US **Current Mailing Address: New Mailing Address:** 6817 SOUTHPOINT PKWY 1888 BROTHER GEENEN WAY STE. 1902 SARASOTA, FL 34236 US JACKSONVILLE, FL 32216 US FEI Number: 59-2305200 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: Name and Address of New Registered Agent: SHIELDS, PAT STOVER, DENNIS 100 WELDON BLVD 1888 BROTHER GEENEN WAY SANFORD, FL 32773 US SARASOTA, FL 34236 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: DENNIS STOVER 05/02/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition SMITH, JUDITH DM Name: Name: 6817 SOUTHPOINT PKWY., STE, 1902 Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: PD () Delete Title: (X) Change () Addition BUSH, JERI Name: BUSH, JERI Name: Address: 918 RAILROAD AVE Address: 918 RAILROAD AVE City-St-Zip: TALLAHASSEE, FL 32310 City-St-Zip: TALLAHASSEE, FL 32310 Title: VD. () Delete Title: PD (X) Change () Addition SHIELDS, PAT SHIELDS, PAT Name: Name: Address: PO BOX 951636 Address: PO BOX 951636 City-St-Zip: LAKE MARY, FL 327951636 City-St-Zip: LAKE MARY, FL 327951636 Title: TD () Delete Title: TD (X) Change () Addition Name: STOVER, DENNIS Name: STOVER, DENNIS Address: 1750 17TH STREET Address: 1888 BROTHER GEENEN WAY SARASOTA, FL 34234 City-St-Zip: City-St-Zip: SARASOTA, FL 34236 Title: () Delete Title: (X) Change () Addition MORRIS, PAT RICHARDSON, TRACY Name: Name: 3250 SW THIRD AVENUE 1301 WEST GOVERNMENT STREET Address: Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: PENSACOLA, FL 32501

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: DENNIS STOVER TD 05/02/2007