

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006536

FILED  
May 04, 2007  
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF PROFESSIONAL LOBBYISTS, INC.

**Current Principal Place of Business:**

150 S MONROE ST  
STE 400  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 11238  
TALLAHASSEE, FL 32302

**New Mailing Address:**

FEI Number: 32-0028505      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:**

ADAMS, L. CARL  
150 S MONROE STE 400  
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: C      ( ) Delete  
Name: PLANTE, KEN  
Address: 324 E VIRGINIA STREET  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VC      ( ) Delete  
Name: KROG, JIM  
Address: 215 S. MONROE STREET., SUITE 601  
City-St-Zip: TALLAHASSEE, FL 32301

Title: P      ( ) Delete  
Name: ADAMS, L CARL  
Address: 150 S MONROE ST STE 400  
City-St-Zip: TALLAHASSEE, FL 32301

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

Title: C      (X) Change ( ) Addition  
Name: YORK, JOE  
Address: 150 SOUTH MONROE ST., SUITE 400  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VC      (X) Change ( ) Addition  
Name: PHILLIPS, KAREN  
Address: 116 SOUTH MONROE ST.  
City-St-Zip: TALLAHASSEE, FL 32301

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: L. CARL ADAMS

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

PRES

05/04/2007

\_\_\_\_\_  
Date