

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006536

FILED
Jan 09, 2009
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:

1625 SUMMIT LAKE DRIVE
STE 300
TALLAHASSEE, FL 32317

Current Mailing Address:

P.O BOX 11238
TALLAHASSEE, FL 32302

New Mailing Address:

1625 SUMMIT LAKE DRIVE
STE 300
TALLAHASSEE, FL 32317

FEI Number: 32-0028505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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: YORK, JOE
Address: 150 SOUTH MONROE ST., SUITE 400
City-St-Zip: TALLAHASSEE, FL 32301

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

Title: () Change () Addition
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 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

PRES

01/09/2009

Electronic Signature of Signing Officer or Director

_____ Date