2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2008
Secretary of State

DOCUMENT# N02000009694

Entity Name: THE FLORIDA ABSTINENCE EDUCATION ASSOCIATION, INC.

Current Principal Place of Business:

8001 66TH STREET N
PINELLAS PARK, FL 33781

New Principal Place of Business:

6850 BELFORT OAKS PLACE
JACKSONVILLE, FL 32216

Current Mailing Address:

8001 66TH STREET N
PINELLAS PARK, FL 33781

New Mailing Address:

2901 BUSCH LAKE BLVD.
TAMPA, FL 33614

FEI Number: 13-4232989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POBJECKY, A. RENEE
786 AVENUE C S.W.
WINTER HAVEN, FL 33880 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: P ( ) Delete
Name: HUBBARTT, DAVE
Address: 8001 66TH STREET N
City-St-Zip: PINELLAS PARK, FL 33781

Title: T ( ) Delete
Name: HARDY, DEANNA
Address: 8001 66TH STREET N
City-St-Zip: PINELLAS PARK, FL 33781

Title: V ( ) Delete
Name: LAYTON, ANDY
Address: 2901 BUSH LAKE BLVD.
City-St-Zip: TAMPA, FL 33614

Title: S ( ) Delete
Name: GARCIA, ELENA
Address: P.O. BOX 109650
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SPELLMAN, CHESTER
Address: 6850 BELFORT OAKS PLACE
City-St-Zip: JACKSONVILLE, FL 32216

Title: T (X) Change ( ) Addition
Name: HUBBARTT, DAVID L
Address: 2901 BUSCH LAKE BLVD.
City-St-Zip: TAMPA, FL 33614

Title: V (X) Change ( ) Addition
Name: MULLINS, VICKIE
Address: 4532 RIVERTON DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: S (X) Change ( ) Addition
Name: PACE, JENNIFER
Address: 6850 BELFORT OAKS PLACE
City-St-Zip: JACKSONVILLE, FL 32216

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: DAVID L HUBBARTT T 01/21/2008

Electronic Signature of Signing Officer or Director — Date