

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000535

FILED
Mar 19, 2011
Secretary of State

Entity Name: FLORIDA TROPICAL FISH FARMS TRADE ASSOCIATION, INC.

Current Principal Place of Business:

316 W CENTRAL AVE
#200
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1519
WINTER HAVEN, FL 33882

New Mailing Address:

FEI Number: 59-3157238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOOZER, DAVID
316 W CENTRAL AVE
#200
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: D
Name: DRAWDY, DAVID
Address: 1507 WILLIAMS ROAD
City-St-Zip: PLANT CITY, FL 33565

Title: DT
Name: LEPOCHAT, PIERRE
Address: PO BOX 1827
City-St-Zip: SEFFNER, FL 33583

Title: D
Name: DIAZ, JASON
Address: 6507 BOB HEAD RD
City-St-Zip: PLANT CITY, FL 33565

Title: DP
Name: RAWLINS, ART
Address: 3402 KENT PATH CT
City-St-Zip: LITHIA, FL 33547

Title: D
Name: DAVID, GARRY
Address: 8956 N DEES RD
City-St-Zip: LAKELAND, FL 33809

Title: D
Name: CARTER, JEFF
Address: 11015 SUMNER RD
City-St-Zip: WIMAUMA, FL 33598

I hereby 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 all other like empowered.

SIGNATURE: ART RAWLINS

PRES

03/19/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date