

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705203

FILED  
Jan 05, 2007  
Secretary of State

**Entity Name:** FLORIDA PROSECUTING ATTORNEY'S ASSOCIATION, INC.

**Current Principal Place of Business:**

107 WEST GAINES STREET  
STE 531  
TALLAHASSEE, FL 323991050 US

**New Principal Place of Business:**

**Current Mailing Address:**

107 WEST GAINES STREET  
STE 531  
TALLAHASSEE, FL 323991050 US

**New Mailing Address:**

**FEI Number:** 23-7131671

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOGENMULLER, JOHN N  
107 WEST GAINES STREET  
STE 531  
TALLAHASSEE, FL 323991050 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: PD ( ) Delete  
Name: COLTON, BRUCE  
Address: 411 SOUTH SECOND STREET  
City-St-Zip: FT. PIERCE, FL 34950

Title: VPD ( ) Delete  
Name: OBER, MARK  
Address: 800 EAST KENNEDY BOULEVARD  
City-St-Zip: TAMPA, FL 33602

Title: T ( ) Delete  
Name: KOHL, MARK  
Address: 530 WHITEHEAD STREET  
City-St-Zip: KEY WEST, FL 33040

Title: SD ( ) Delete  
Name: CERVONE, WILLIAM  
Address: 120 WEST UNIVERSITY AVENUE  
City-St-Zip: GAINESVILLE, FL 32602

**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:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN N. HOGENMULLER

EXEC

01/05/2007

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

\_\_\_\_\_  
Date