

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003585

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Entity Name:** FLORIDA FAMILY ASSOCIATION, INC.

**Current Principal Place of Business:**

1018 SE 38TH STREET #102  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

5489 JET PORT INDUSTRIAL BLVD.  
TAMPA, FL 33634 US

**Current Mailing Address:**

P. O. BOX 46547  
TAMPA, FL 33647 US

**New Mailing Address:**

**FEI Number:** 59-3283890      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CATON, DAVID  
1018 SE 38TH STREET #102  
CAPE CORAL, FL 33904 US

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

CATON, DAVID  
5489 JET PORT INDUSTRIAL BLVD.  
TAMPA, FL 33634 US

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

04/17/2012

Date

**OFFICERS AND DIRECTORS:**

Title: SD  
Name: LOUGHRIE, SANDRA L  
Address: 481 WEST DAVIS BLVD  
City-St-Zip: TAMPA, FL 33606

Title: D  
Name: RIGGS, ROBERT  
Address: 18444 TANGLEWOOD DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: PTD  
Name: CATON, DAVID E  
Address: 5489 JET PORT INDUSTRIAL BLVD.  
City-St-Zip: TAMPA, FL 33904

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: DAVID CATON

Electronic Signature of Signing Officer or Director

PDT

04/17/2012

Date