2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2015
Secretary of State
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Entity Name: THE FLORIDA STATE DEMOLAY ASSOCIATION, INC.

Current Principal Place of Business:

164 NIGHTINGALE CIRCLE
ELLENTON, FL 34222-4254

Current Mailing Address:

164 NIGHTINGALE CIRCLE
ELLENTON, FL 34222-4254 US

FEI Number: 59-1271058

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEVAN, CHARLES M
164 NIGHTINGALE CIRCLE
ELLENTON, FL 34222-4254 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 — Date

Officer/Director Detail :

Title	PD
Name	BERRY, STEPHEN M
Address	2910 KELLY FOREST PARKWAY STE D4-395
City-State-Zip:	MICCOSUKEE CPO FL 32309

Title	TD
Name	LEVAN, CHARLES M
Address	164 NIGHTINGALE CIRCLE
City-State-Zip:	ELLENTON FL 34222-4254

Title	SECRETARY, DIRECTOR
Name	MEGUIAR, JEROME M
Address	145 W DAVIS BLVD
City-State-Zip:	TAMPA FL 33606-3539

Title	DIRECTOR
Name	GRAULICH, ALLAN J
Address	214 FLAGLER AVE
City-State-Zip:	EDGEWATER FL 31232-2110

Title	D
Name	LYNN, RICHARD E
Address	220 N OCEAN ST
City-State-Zip:	JACKSONVILLE FL 32202-3218

Title	VPD
Name	GLENDINNING, RUSSELL B
Address	4496 GOLDEN LAKE DRIVE
City-State-Zip:	SARASOTA FL 34233

Title	DIRECTOR
Name	MEGUIAR, ROBERT J
Address	3303 W PRICE AVE
City-State-Zip:	TAMPA FL 33611-3722

Title	DIRECTOR
Name	MARTI, WILLIAM A
Address	5509 VAN BUREN ST
City-State-Zip:	HOLLYWOOD FL 33021-7165

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: CHARLES M. LEVAN TREASURER 04/23/2015

Electronic Signature of Signing Officer/Director Detail — Date