

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753863

Entity Name: FTA PAC, INC.

Current Principal Place of Business:

350 E COLLEGE AVE.
TALLAHASSEE, FL 32301

Current Mailing Address:

350 E COLLEGE AVE.
TALLAHASSEE, FL 32301

FEI Number: 59-2882065

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARMSTRONG, KENNETH S. PHD
350 EAST COLLEGE AVE.
TALLAHASSEE, FL 32301 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: KENNETH S. ARMSTRONG, PH. D

01/28/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name DICKS, TERRY
Address 4458 SOUTH US HIGHWAY 441
City-State-Zip: LAKE CITY FL 32025

Title DIRECTOR
Name WALPOLE, KEITH
Address 269 NW 9TH STREET
City-State-Zip: OKEECHOBEE FL 34973

Title SECRETARY, TREASURER
Name ARMSTRONG, KENNETH S PHD
Address 350 EAST COLLEGE AVENUE
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name DAVIS, JIMMY
Address 5270 SE 131ST STREET
City-State-Zip: STARK FL 32091

Title DIRECTOR
Name STOHLER, R. L.
Address 5421 N. 59TH STREET
City-State-Zip: TAMPA FL 33610

Title DIRECTOR
Name BACALIS, STEVE
Address 417 EDGEWOOD AVENUE S
City-State-Zip: JACKSONVILLE FL 32254

Title DIRECTOR
Name BAUGH, DICK
Address PO BOX 1449
City-State-Zip: TAVARES FL 32778-1449

Title DIRECTOR
Name FULMER, PHILIP
Address 8340 AMERICAN WAY
City-State-Zip: GROVELAND FL 34736

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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: KENNETH S ARMSTRONG

SECRETARY, TREASURE 01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HYDER, DOC
Address 41124 MESSICK ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name OAKLEY, TOMMY
Address 101 ABC ROAD
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name SANDLIN, ROB
Address 200 W. FORSYTH STREET
7TH FLOOR
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name BOSTICK, MARK
Address 27 MOUNTAIN LAKE
City-State-Zip: LAKE WALES FL 33898

Title DIRECTOR
Name CULLIGAN, TOMMY
Address PO BOX 32024
City-State-Zip: LAKELAND FL 33802

Title DIRECTOR
Name ARMELLINI, RICHARD
Address PO BOX 678
City-State-Zip: PALM CITY FL 34991

Title DIRECTOR
Name WATKINS, CARY
Address 134 DEER LAKE CIRCLE
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name MCTYRE, JOHN
Address PO BOX 590147
City-State-Zip: ORLANDO FL 32859

Title DIRECTOR
Name PRITCHETT, PHILLIP
Address PO BOX 311
City-State-Zip: LAKE BUTLER FL 32054

Title DIRECTOR
Name TRAVILLION, DUPLÉ
Address 942 S. SHADY GROVE ROAD
City-State-Zip: MEMPHIS TN 38120

Title DIRECTOR
Name MCRAE, ROB
Address 1001 13TH AVENUE E
City-State-Zip: BRADENTON FL 34208

Title DIRECTOR
Name CHRISTIE, BRAD
Address 1390 ENCLAVE PARKWAY
City-State-Zip: HOUSTON TX 77077

Title DIRECTOR
Name D'ANDREA, NICK
Address 1400 N. HURSTBOURNE PKWY
City-State-Zip: LOUISVILLE KY 40243