

**2015 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

02/23/2015

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

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

Title D  
Name BARR, JAMES  
Address 11690 NW 105TH STREET  
City-State-Zip: MIAMI FL 33178

Title D  
Name BOSTICK, MARK  
Address 502 EAST BRIDGERS AVENUE  
City-State-Zip: AUBURNDALE FL 33823

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

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

*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

**PRESIDENT & CEO**

02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date