2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2016
Secretary of State
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Entity Name: THE FLORIDA FIJI GRADUATE ASSOCIATION, INC.

Current Principal Place of Business:

C/O DAVID SMITH
667 FRATERNITY DRIVE
GAINESVILLE, FL 32603

Current Mailing Address:

C/O DAVID SMITH
P.O. BOX 2278
GREENEVILLE, TN 37744 US

FEI Number: 30-0471263

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, DAVID MICHAEL
C/O DAVID SMITH
667 FRATERNITY DRIVE
GAINESVILLE, FL 32603 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: DAVID MICHAEL SMITH 03/08/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREASURER
Name	SMITH, DAVID M
Address	PO BOX 2278
City-State-Zip:	GREENEVILLE TN 37744

Title	SECRETARY
Name	KAYS, ANDREW
Address	667 FRATERNITY DRIVE
City-State-Zip:	GAINESVILLE FL 32603

Title	D
Name	LEVARGE, LINCOLN
Address	7 FRATERNITY DRIVE
City-State-Zip:	GAINESVILLE FL 32603

Title	DIRECTOR
Name	HOLLOWAY, CHARLIE
Address	667 FRATERNITY DRIVE
City-State-Zip:	GAINESVILLE FL 32603

Title	DP
Name	KELLAR, ED
Address	500 N.W. 54TH TERRACE
City-State-Zip:	GAINESVILLE FL 32607

Title	D
Name	SMITH, WARREN
Address	1721 LONGVIEW LANE
City-State-Zip:	TARPON SPRINGS FL 34689

Title	VP
Name	VIGNOLA, JAMES M
Address	1628 NW 6TH STREET
City-State-Zip:	GAINESVILLE FL 32609

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 SMITH TREASURER 03/08/2016

Electronic Signature of Signing Officer/Director Detail — Date