# 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.

PRESIDENT

#### SIGNATURE: ART RAWLINS

City-State-Zip: WIMAUMA FL 33598

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N9300000535

## Entity Name: FLORIDA TROPICAL FISH FARMS TRADE ASSOCIATION, INC.

## Current Principal Place of Business:

316 W CENTRAL AVE #200 WINTER HAVEN, FL 33880

#### **Current Mailing Address:**

P.O. BOX 1519 WINTER HAVEN, FL 33882

### FEI Number: 59-3157238

## Name and Address of Current Registered Agent:

BOOZER, DAVID 316 W CENTRAL AVE #200 WINTER HAVEN, FL 33880 US

SIGNATURE			
	Electronic Signature of Registered Agent		
Officer/Dire	ctor Detail :		
Title	D, SECRETARY	Title	DT
Name	MOORE, SANDY	Name	LEPOCHAT, PIERRE
Address	BIG BEND ROAD	Address	PO BOX 1827
City-State-Zip:	GIBSONTON FL 33534	City-State-Zip:	SEFFNER FL 33583
Title	D	Title	DP
Name	DIAZ, JASON	Name	RAWLINS, ART
Address	6507 BOB HEAD RD	Address	3402 KENT PATH CT
City-State-Zip:	PLANT CITY FL 33565	City-State-Zip:	LITHIA FL 33547
Title	D	Title	D
Name	DAVID, GARRY	Name	CARTER, JEFF
Address	8956 N DEES RD	Address	11015 SUMNER RD
City-State-Zip:	LAKELAND FL 33809	City-State-Zip:	WIMAUMA FL 33598
Title	D VP		
Name	SKIDMORE, JOHN		
Address	20112 HOBBS ROAD		

Certificate of Status Desired: No

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:

## FILED Feb 18, 2014 Secretary of State CC6312855794

02/18/2014

Date