

FILED
Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90164 008 ****61.25

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 700004		
1. Entity Name FLORIDA FINANCIAL SERVICES ASSOCIATION, INC.		
Principal Place of Business 1020 E LAFAYETTE ST SUITE 107 TALLAHASSEE, FL 32301 US		Mailing Address 1020 E LAFAYETTE ST SUITE 107 TALLAHASSEE, FL 32301 US
DO NOT WRITE IN THIS SPACE		
		40000793 
		01052006 No Chg-NP CR2E037 (11/05)
4. FEI Number 59-0661624		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
SHULER, JOSEPH S 1020 E LAFAYETTE ST SUITE 107 TALLAHASSEE, FL 32301		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
DATE _____		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CPD SHULER, JOSEPH S 1020 E LAFAYETTE ST #107 TALLAHASSEE, FL 32301	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD ERATH, GREG 1660-8 NO MONROE STREET TALLAHASSEE, FL 32301	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CASH, JEFF 206 8TH ST DES MOINES, IA 50309	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if		