

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701874

FILED
Feb 15, 2010
Secretary of State

Entity Name: FLORIDA COSMETOLOGY ASSOCIATION, INC.

Current Principal Place of Business:

1124 MARY STREET
JENNINGS, FL 32053

New Principal Place of Business:

4492 HARBOUR NORTH COURT
JACKSONVILLE, FL 32225

Current Mailing Address:

P.O. BOX 86
JENNINGS, FL 32053

New Mailing Address:

4492 HARBOUR NORTH COURT
JACKSONVILLE, FL 32225

FEI Number: 59-1003667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, EDWARD TREASUR
1124 MARY STREET
JENNINGS, FL 32053 US

Name and Address of New Registered Agent:

POOLE, BONNIE A TREASUR
4492 HARBOUR N.CT.
JACKSONVILLE, FL 32225 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: BONNIE A. POOLE

02/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BREWER, TERRY
Address: 444 COPPERSTONE CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

Title: TRES
Name: POOLE, BONNIE A
Address: 4492 HARBOUR N. CT.
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP
Name: CHAPMAN, CHARLES
Address: 2950 ST. JOHNS AVE. #3
City-St-Zip: JACKSONVILLE, FL 32205

Title: S
Name: POOLE, BONNIE
Address: 4492 HARBOUR N. COURT
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: CLAY, JERRY
Address: 1219 SLASH PINE CIRCLE
City-St-Zip: PUNTA GORDA, FL 33950

Title: D
Name: FIGUEROA, IVETTE
Address: 6029 LAKE POINTE DR. #203
City-St-Zip: ORLANDO, FL 32822

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: BONNIE A. POOLE

TRES

02/15/2010

Electronic Signature of Signing Officer or Director

Date