

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705004

FILED
Feb 22, 2007
Secretary of State

Entity Name: AMERICAN CANCER SOCIETY, FLORIDA DIVISION, INC.

Current Principal Place of Business:

3709 W JETTON AVE .
TAMPA, FL 336295146

New Principal Place of Business:

Current Mailing Address:

3709 W JETTON AVE .
TAMPA, FL 336295146

New Mailing Address:

FEI Number: 59-0657320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WEBSTER, DONALD
3709 W. JETTON AVE.
TAMPA, FL 336295146 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: LARSEN, MARTIN R
Address: 8527 PINES BLVD, SUITE 105
City-St-Zip: PEMBROKE PINES, FL 33024

Title: AST () Delete
Name: PAVLIK, TANYA M CPA
Address: 3709 W JETTON AVE
City-St-Zip: TAMPA, FL 33629

Title: PD () Delete
Name: KASPER, MICHAEL E MD
Address: RADIATION ONCOLOGY, 800 MEADOWS RD
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: OTTO, BARBARA CFP
Address: 1141 SWEET HEATHER LANE
City-St-Zip: APOPKA, FL 32712

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: CHAPERON, JOHN S
Address: 2825 NE 35TH COURT
City-St-Zip: FT. LAUDERDALE, FL 33308

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TANYA PAVLIK

AST

02/22/2007

Electronic Signature of Signing Officer or Director

Date