## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 706978** 

FILED Jan 06, 2005 Secretary of State

Entity Name: THE FLORIDA ELECTRONIC SALES AND SERVICE ASSOCIATION, INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 1409 GLENDALE RD JACKSONVILLE, FL 32216 LIS **Current Mailing Address: New Mailing Address:** 1409 GLENDALE RD JACKSONVILLE, FL 32216 US FEI Number: 23-7406774 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, BILLY F 1409 GLENDALE RD JACKSONVILLE, FL 32216 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition CISSON, KEN EUBANKS, PAT Name: Name: 7247 ADELE CT. Address: 5323-3 FIRESTONE RD. Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32210 Title: Title: ( ) Delete () Change () Addition EUBANKS, JOHN Name: Name: Address: 5323-3 FIRESTONE Address: City-St-Zip: JAAX, FL 32210 City-St-Zip: Title: () Delete Title: () Change () Addition SCOTT, LARRY Name: Name: 507 S. LAKE PARKER DR. Address: Address: City-St-Zip: LAKELAND, FL City-St-Zip: Title: VΡ ( ) Delete Title: (X) Change ( ) Addition Name: EUBANKS, PAT Name: ALLEN, ETHAN 5323-3 FIRESTONE RD. Address: Address: 10878 CARROL RD. City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: BRYCEVILLE, FL 32009 Title: () Delete Title: () Change () Addition WILLIAMS, BILLY, Name: Name: 1409 GLENDALE RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: () Delete Title: () Change () Addition BLUZE, MARAGARET Name: Name: Address: 13826 WALSINGHAM RD. Address: LARGO, FL 33774 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BILLY F. WILLIAMS T 01/06/2005