

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706978

FILED  
Jan 04, 2008  
Secretary of State

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

**Current Principal Place of Business:**

1409 GLENDALE RD  
JACKSONVILLE, FL 32216 US

**New Principal Place of Business:**

**Current Mailing Address:**

1409 GLENDALE RD  
JACKSONVILLE, FL 32216 US

**New Mailing Address:**

**FEI Number:** 23-7406774

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, BILLY F  
1409 GLENDALE RD  
JACKSONVILLE, FL 32216 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: P ( ) Delete  
Name: EUBANKS, PAT  
Address: 5323-3 FIRESTONE RD.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: EUBANKS, JOHN  
Address: 5323-3 FIRESTONE  
City-St-Zip: JAAX, FL 32210

Title: D ( ) Delete  
Name: SCOTT, LARRY  
Address: 507 S. LAKE PARKER DR.  
City-St-Zip: LAKELAND, FL

Title: VP ( ) Delete  
Name: ALLEN, ETHAN  
Address: 10878 CARROL RD.  
City-St-Zip: BRYCEVILLE, FL 32009

Title: T ( ) Delete  
Name: WILLIAMS, BILLY,  
Address: 1409 GLENDALE RD  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: BLUZE, MARAGARET  
Address: 11448 128TH AVE.  
City-St-Zip: LARGO, FL 33778

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: BILLY F. WILLIAMS

TREA

01/04/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date