2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712998

FILED Feb 16, 2009 Secretary of State

Entity Name: THE FLORIDA AUCTIONEERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

TITUSVILLE, FL 32796 US

Current Mailing Address: New Mailing Address:

422 JULIA ST.

TITUSVILLE, FL 32796 US

FEI Number: 59-2722317 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:

SHULER, DEBBIE 422 JULIA ST

TITUSVILLE, FL 32796 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BRENER, ROY J MCLENDON, DEANA Name: Name: 4124 SW CR 18 Address: P..O.. BOX 708 Address:

City-St-Zip: FT WHITE, FL 32038 City-St-Zip: NEWBERRY, FL 32669

Title: PΕ Title: (X) Change () Addition () Delete FISHER, CHRIS Name: LAND, FRANK E Name:

Address: 2030 HIBISCUS DR Address: P.O. BOX 61567 City-St-Zip: EDGEWATER, FL 32141 City-St-Zip: FTT MYERS, FL 33906

Title: () Delete Title: (X) Change () Addition

MCCLENDON, DEANA FREEMAN, LEN Name: Name: Address: P.O. BOX 708 Address: 114 S 2ND ST City-St-Zip: NEWBERRY, FL 32669 City-St-Zip: PALATKA, FL 32117

Title: ST () Delete Title: ST (X) Change () Addition

Name: SHULER, DEBBIE Name: SHULER, DEBRA Address: 422 JULIA ST Address: 422 JULIA ST TITUSVILLE, FL 32796 City-St-Zip: City-St-Zip: TITUSVILLE, FL 32796

Title: () Delete Title: (X) Change () Addition

VAN DEREE, NEAL FISHER, CHRIS Name: Name: 710 LAGUNA DR 2030 HIBISCUS Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: EDGEWATER, FL 32141

Title: (X) Delete Title: () Change () Addition

KLOSTERMAN, TRISHA Name: Name: Address: 8880 BALLENTINE Address: OVERLAND PARK, KS 66214 City-St-Zip: 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: DEBRA SHULER ST 02/16/2009