2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2003
Secretary of State

DOCUMENT# 715106

Entity Name: FLORIDA ASSOCIATION OF COMMUNITY COLLEGES, INC.

Current Principal Place of Business:

816 S ML KING BLVD
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

816 SOUTH MARTIN LUTHER KING BLVD
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-1423380 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALBERTSON, HARRY T
816 S ML KING BLVD
TALLAHASSEE, FL 32301 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:	PP	( ) Delete
Name:	TRAYNOM, JOYCE	
Address:	CHIPOLA JUNIOR COLLEGE	
City-St-Zip:	MARIANNA, FL 32446	
Title:	PD	( ) Delete
Name:	COMINS, MICHEAL	
Address:	HILLSBOROUGH COMMUNITY COLLEGE	
City-St-Zip:	TAMPA, FL 33606	
Title:	PE	( ) Delete
Name:	SHAFFER, BILL	
Address:	SOUTH FLORIDA COMMUNITY COLLEGE	
City-St-Zip:	AVON PARK, FL 33825	
Title:	D	( ) Delete
Name:	ALBERTSON, HARRY T	
Address:	816 S ML KING BLVD	
City-St-Zip:	TALLAHASSEE, FL 32301	
Title:	VD	( ) Delete
Name:	AYRES, PATRICIA	
Address:	MIAMI-DADE COMMUNITY COLLEGE	
City-St-Zip:	MIAMI, FL 33167	
Title:	VD	( ) Delete
Name:	PETERS, JEFF	
Address:	PALM BEACH COMMUNITY COLLEGE	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PE	(X) Change ( ) Addition
Name:	SZUCH, PAUL	
Address:	PASCO-HERNANDO COMMUNITY COLLEGE	
City-St-Zip:	NEW PORT RICHEY, FL 34654	
Title:	VD	(X) Change ( ) Addition
Name:	BONSALL, VIVIANNE	
Address:	BREVARD COMMUNITY COLLEGE	
City-St-Zip:	COCOA, FL 32922	
Title:	PP	(X) Change ( ) Addition
Name:	SHAFFER, BILL	
Address:	SOUTH FLORIDA COMMUNITY COLLEGE	
City-St-Zip:	AVON PARK, FL 33825	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	PD	(X) Change ( ) Addition
Name:	AYRES, PATRICIA	
Address:	MIAMI-DADE COMMUNITY COLLEGE	
City-St-Zip:	MIAMI, FL 33167	
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: HARRY T. ALBERTSON DR. 01/08/2003

Electronic Signature of Signing Officer or Director — Date