2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT #717899 02-07-2005 90098 049 ****61.25 1. Entity Name FLORIDA ATTRACTIONS ASSOCIATION, INC. Mailing Address Principal Place of Business 1114 N GADSDEN ST 1114 N GADSDEN ST 50011502 TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 Chg-NP CR2E037 (10/03) 4. FEI Number 59-1724091 City & State City & State **Applied** For Not Applicable Zio Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROSS, DONNA H. 1114 N GADSDEN ST Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE, FL 32303 8. 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algosture required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. .7) ☐ Addition TITLE ☐ Delete TITLE ☐ Change FRASER, ELANIE NAME NAME Elaine Fraser STREET ADORESS 19 SAN MARCO AVE STREET ADDRESS SAINT AUGUSTINE, FL 32084 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition Eria Einstad NAME EISTAD, ERIE NAME 4400 RICKERBACKER STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33149 CITY-ST-ZIP DS ☐ Delete TITLE Addition CRAIG, SANDY NAME NAME STREET ADDRESS 254 D SANT MARCO AVE STREET ADDRESS SAINT AUGUSTINE, FL 32084 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME HOLMES, PHIL NAME STREET ADDRESS 1365 W. HONORAIL AVE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32830 CITY-ST-ZIP m F Delete TITLE Tange (☐ Addition Steve Geis GERS, STEVE NAME DNPS STREET ADDRESS STREET ADDRESS ORLANDO, FL 32899 CITY-ST-ZIP CITY-ST-ZIP MLE ☐ Delete TITLE Celect ☐ Change **₽** Addition S. Hiami Are NAME NAME STREET ADDRESS STREET ADDRESS Heami Fl CITY-ST-ZIP 33129 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 inchanged, or on an attractment with an address, with all office like empowered.

FILED

Feb 07, 2005 8:00 am