## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#724130** 

FILED Feb 04, 2009 Secretary of State

Entity Name: FLORIDA SECURITIES DEALERS ASSOCIATION, INC.

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

704 FOREST LAIR TALLAHASSEE, FL 32312

**Current Mailing Address: New Mailing Address:** 

PO BOX 12092

TALLAHASSEE, FL 323172092

FEI Number: 59-2467227 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:

FREDERICK, III, CPA, FREDERICK 2640-A MITCHAM DRIVE TALLAHASSEE, FL 32308 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

WHITTLE, EVAN E COOK, O'BANNON M Name: Name:

1 PROGRESS PLAZA, SUITE 165 Address: 704 FOREST LAIR Address:

City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: TALLAHASSEE, FL 32312 US

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

HIRSCH, ANDREW Name: Name: Address: 401 E. JACKSON STREET Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

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

CERRUTO, KENNITH Name: Name: 888 EAS LAS OLAS BLVD, 6TH FLOOR Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip:

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

STRUMLAUF, LANE O Name: Name: 1200 S. PINE ISLAND ROAD, SUITE 800 Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip:

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

HIRSCH, ANDREW Name: Name: 401 E. JACKSON STREET, SUITE 2900 Address: Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

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

CERRUTO, KENNETH Name: Name: Address: 888 EAST LAS OLAS BOULEVARD 6TH FLOOR Address: FORT LAUDERDALE, FL 33301 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: O'BANNON M. COOOK **EXDR** 02/04/2009

Electronic Signature of Signing Officer or Director

Date