

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725599

FILED
Apr 29, 2009
Secretary of State

Entity Name: FLORIDA ASSOCIATION FOR MEDIA IN EDUCATION, INC.

Current Principal Place of Business:

2563 CAPITAL MEDICAL BLVD
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

2563 CAPITAL MEDICAL BLVD
TALLAHASSEE, FL 32308 US

New Mailing Address:

FEI Number: 23-7367407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BODKIN, LARRY E JR
2563 CAPITAL MEDICAL BLVD
TALLAHASSEE, FL 32308 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: D () Delete
Name: BODKIN, LARRY E JR
Address: 2563 CAPITAL MEDICAL BLVD
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: P () Delete
Name: NEEDHAM, MIRIAM
Address: 1014 SW 7TH RD, SUITE 1
City-St-Zip: OCALA, FL 34474 US

Title: PE () Delete
Name: SVEC, DEB
Address: 436 PRIVATEER ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: T () Delete
Name: BARGAR, SHERIE
Address: 4377 WEEPING WILLOW CT
City-St-Zip: CASSELLBERRY, FL 32256 US

Title: V () Delete
Name: VOSE, BELINDA
Address: 10204 SW 37TH PLACE
City-St-Zip: GAINESVILLE, FL 32043 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: SVEC, DEBORAH
Address: 436 PRIVATEER ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: PE (X) Change () Addition
Name: SOLOMON, CECILIA
Address: 6017 FOREST CREEK DRIVE
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: T (X) Change () Addition
Name: SEALE, JOANNE
Address: 6150 BANYAN STREET
City-St-Zip: COCOA, FL 32927 US

Title: S (X) Change () Addition
Name: PRZECLAWSKI, GAIL
Address: 3352 STERLING LANE
City-St-Zip: ORLANDO, FL 32817 US

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: LARRY BODKIN

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date