

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90012 034 ****61.25

DOCUMENT # 731868 1. Entity Name THE FLORIDA TAX COLLECTORS, INC.					
Principal Place of Business 225 SOUTH ADAMS ST SUITE 200 TALLAHASSEE, FL 32302 US			Mailing Address 225 SOUTH ADAMS SUITE 200 TALLAHASSEE, FL 32302 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-6000619	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BRAWER, MICHAEL P 225 SOUTH ADAMS STREET SUITE 200 TALLAHASSEE, FL 32301				Name Kenza van Assenderp Street Address (P.O. Box Number is Not Acceptable) 225 South Adams Street Suite 200 City Tallahassee FL 32302	
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 Signature, typed or printed name of registered agent and title if applicable				DATE 4/10/2008 (NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PP	☒ Delete	TITLE	PP	☒ Change ☐ Addition
NAME	HOLLEY, JANET		NAME	Burnham, Jr., George L	
STREET ADDRESS	POB 1312		STREET ADDRESS	215 Pine Ave SW, Ste A	
CITY-ST-ZIP	PENSACOLA, FL 32596		CITY-ST-ZIP	Live Oak, FL 32064	
TITLE	P	☒ Delete	TITLE	P	☒ Change ☐ Addition
NAME	BURNHAM, GEORGE		NAME	Burton, Jr., Ken	
STREET ADDRESS	215 PINE AVE STE 1		STREET ADDRESS	819 301 Boulevard West	
CITY-ST-ZIP	LIVE OAK, FL 32060		CITY-ST-ZIP	Bradenton, FL 34205	
TITLE	V	☒ Delete	TITLE	V	☒ Change ☐ Addition
NAME	BURTON, KEN		NAME	Tedder, Joe G.	
STREET ADDRESS	POST OFFICE BOX 25300		STREET ADDRESS	430 E Main Street	
CITY-ST-ZIP	BRADENTON, FL 34206		CITY-ST-ZIP	Bartow, FL 33830	
TITLE	T	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	CATHY, CURTIS		NAME		
STREET ADDRESS	PO BOX 850		STREET ADDRESS		
CITY-ST-ZIP	FT. MEYERS, FL 33902		CITY-ST-ZIP		
TITLE	S	☒ Delete	TITLE	S	☒ Change ☐ Addition
NAME	WARREN, JANICE		NAME	Maloy, Doris	
STREET ADDRESS	210 N APOPKA STE 100		STREET ADDRESS	3425 Thomasville Rd, Ste 19	
CITY-ST-ZIP	INVERNESS, FL 34450		CITY-ST-ZIP	Tallahassee, FL 32309	
TITLE		☐ Delete	TITLE	V	☐ Change ☒ Addition
NAME			NAME	Warren, Janice	
STREET ADDRESS			STREET ADDRESS	210 N. Apopka Ste 100	
CITY-ST-ZIP			CITY-ST-ZIP	Inverness, FL 34450	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE 4/10/08 239-533-6060 Date Daytime Phone #		

CATHERINE M. CURTIS