## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 21, 2008 8:00 am Secretary of State

1. Entity Nam	MENT #732797  SLAND TAXPAYERS' ASS	SOCIATION, INC.		04-21-2008 90076 013 ****61.25			
Principal Plac 1558 HEIGH MARCO ISLAI		Mailing Address PO BOX 1263 MARCO ISLAND, FL 3	4146 US		1818 1918 1981 STON OLSKI STON ÅKKI ATON 1818	151 BJ 1884	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04172008 Chg-N	P CR2E037 (12/06)		
City & State		City & State		4. FEI Number 59-1828783		plied For Applicable	
Zip	Country	Zip	Country	5. Certificate of Status	_ \$9.75 add	itional	
	6. Name and Address of Current	Registered Agent		7. Name and Address	of New Registered Agent		
DUKLAUER, ROBERT			Name	Name			
1360 QUINTARA MARCO ISLAND, FL 34145			Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
			City	FL Zip Code			
SIGNATURE .	ions of registered agent. Signature, typed or printed name of registered agen	Land trie 6 applicable. (NO	TE: Registered Agent signature rec	quired when reinstaling)	DATE		
ļ	Filing Fee is \$61.25	9 Flection Ca		<b>I</b>			
ļ	Due by May 1, 2008		mpaign Financing Contribution.	\$5.00 May Be Added to Fees	Make check payable to Florida Department of St		
10.	Due by May 1, 2008 OFFICERS AND D	Trust Fund		Added to Fees		ate	
TITLE	OFFICERS AND D	Trust Fund	Contribution.	Added to Fees	Florida Department of St	ate	
	OFFICERS AND D P BILES, FAY R	Trust Fund	Contribution.	Added to Fees	Florida Department of State O OFFICERS AND DIRECTORS IN	ate	
TITLE NAME	OFFICERS AND D	Trust Fund	Contribution.	Added to Fees	Florida Department of State O OFFICERS AND DIRECTORS IN	ate	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P BILES, FAY R 1588 HEIGHTS CT MARCO ISLAND, FL 34145 D	Trust Fund	Contribution.   11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Added to Fees	Florida Department of State O OFFICERS AND DIRECTORS IN	ate	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BILES, FAY R 1588 HEIGHTS CT MARCO ISLAND, FL 34145 D MCCUNE, LINDA	Trust Fund	Contribution.   11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Added to Fees	Florida Department of St. O OFFICERS AND DIRECTORS IN  Change	10 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P BILES, FAY R 1588 HEIGHTS CT MARCO ISLAND, FL 34145 D MCCUNE, LINDA 1596 SHORES CT.	Trust Fund	Contribution.   11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Added to Fees	Florida Department of St. O OFFICERS AND DIRECTORS IN  Change	10 Addition	
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2. Thereby certify that the information supplied with this filling 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 eath; 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:

Day R. Bules
SIGNATURE AND FFRED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

April 21, 2008

289 347 3089 Fac 239 394 8140