2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733387

FILED Apr 05, 2004 Secretary of State

Entity Name: FLORIDA EMERGENCY PREPAREDNESS ASSOCIATION, INC.

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

3015 SHARRON LAKES NORTH 3015 SHANNON LAKES NORTH

STE 303 STE 303

TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32309

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

3015 SHARRON LAKES NORTH 3015 SHANNON LAKES NORTH

STE 303 STE 303 TALLAHASSEE, FL 32309

TALLAHASSEE, FL 32309 US

FEI Number: 59-2389989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

GLASS, STEVE GLASS, STEVE

3015 SHARRON LAKES NORTH 3015 SHANNON LAKES NORTH STE 303 STE 303

TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32309 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: STEVE GLASS 04/05/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

GISPERT, LARRY MOORE, RICHARD Name: Name: 2711 E HANNA AVE Address: 3015 SHANNON LAKES N #303 Address: City-St-Zip: TAMPA, FL City-St-Zip: TALLAHASSEE, FL 32309

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

WINDON, KAREN Name: STOUGHTON, LINDA Name:

Address: 3015 SHARRON LAKES NORTH., STE 303 Address: 3015 SHANNON LAKES NORTH., STE 303

City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32309

Title: ED () Delete Title: ED (X) Change () Addition GLASS, STEVE GLASS, STEVE Name: Name:

3015 SHARRON LAKES NORTH., STE 303 Address: Address: 3015 SHANNON LAKES NORTH., STE 303

City-St-Zip: TALLAHASSEE, FL 32309 US City-St-Zip: TALLAHASSEE, FL 32309 US

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

Name: MCQUEEN, RON Name: REED, CHAD

3015 SHARRON LAKES NORTH., STE 303 3015 SHANNON LAKES NORTH., STE 303 Address: Address:

City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32309

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEVE GLASS ED 04/05/2004