

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733387

FILED
Jan 09, 2007
Secretary of State

Entity Name: FLORIDA EMERGENCY PREPAREDNESS ASSOCIATION, INC.

Current Principal Place of Business:

3015 SHANNON LAKES NORTH
STE 303
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

3015 SHANNON LAKES NORTH
STE 303
TALLAHASSEE, FL 32309 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

GLASS, STEVE
3015 SHANNON LAKES NORTH
STE 303
TALLAHASSEE, FL 32309 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: T () Delete
Name: MOORE, RICHARD
Address: 3015 SHANNON LAKES N #303
City-St-Zip: TALLAHASSEE, FL 32309

Title: PP () Delete
Name: STOUGHTON, LINDA
Address: 3015 SHANNON LAKES NORTH., STE 303
City-St-Zip: TALLAHASSEE, FL 32309

Title: ED () Delete
Name: GLASS, STEVE
Address: 3015 SHANNON LAKES NORTH., STE 303
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: PD () Delete
Name: REED, CHAD
Address: 3015 SHANNON LAKES NORTH., STE 303
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: JOYNER, HAROLD
Address: 3015 SHANNON LAKES N #303
City-St-Zip: TALLAHASSEE, FL 32309

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

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

Title: P (X) Change () Addition
Name: CARPER, TONY
Address: 3015 SHANNON LAKES NORTH., STE 303
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 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: STEVE GLASS

ED

01/09/2007

Electronic Signature of Signing Officer or Director

_____ Date