2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#740849

FILED Jan 14, 2009 Secretary of State

Entity Name: FLORIDA OUTDOOR WRITERS ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
24 NW 33 (COURT				
SUITE A GAINESVIL	LE, FL 32607	US			
Current Mailing Address:			New Maili	New Mailing Address:	
24 NW 33 (SUITE A	COURT				
	LE, FL 32607	US			
FEI Number:	59-2190309	FEI Number Applied For () FEI	Number Not App	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
THOMPSON, TOMMY 24 NW 33 COURT SUITE A GAINESVILLE, FL 32607 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:					
	Electronic	Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	EDC () E THOMPSON, TOP 24 NW 33 COUR GIANESVILLE, F	T, SUITE A	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () E KUMISKI, JOHN 284 CLEARVIEW CHULUATA, FL 3		Title: Name: Address: City-St-Zip:	P (X) Change () Addition KELLY, KELLY 1451 SANDY LANE CLEARWATER, FL 33755 US	
Title: Name: Address: City-St-Zip:	1VP () E BRADEN, KELLY 1451 SANDY LAN CLEARWATER, F	NE .	Title: Name: Address: City-St-Zip:	1VP (X) Change () Addition ALLEN, RALPH 235 POMPANO TER PUNTA GORDA, FL 33950 US	
Title: Name: Address: City-St-Zip:	2VP () E LYNN, LORETTA 1233 CASTLEPO WINTER GARDE	RT ROAD	Title: Name: Address: City-St-Zip:	2VP (X) Change () Addition FULTON, ROBERT 3617 AUSTIN ROAD MONROE, NC 28112 US	
Title: Name: Address: City-St-Zip:	S ()E ARRINGTON, ED P.O. BOX 1976 ALACHUA, FL 32		Title: Name: Address: City-St-Zip:	S (X) Change () Addition JILL, BORSKI 118 CORAL AV TAVERNIER, FL 33070 US	
Title: Name: Address: City-St-Zip:	T ()E MORELLO, FRAN P.O. BOX 1447 CRAWFORDVILL		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: TOMMY THOMPSON EDC 01/14/2009