

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741920

FILED
Apr 26, 2004
Secretary of State**Entity Name:** FLORIDA TELECOMMUNICATIONS ASSOCIATION, INC.**Current Principal Place of Business:**501 POLK ST STE 680
PO BOX 1776
TAMPA, FL 33602**New Principal Place of Business:****Current Mailing Address:**PO BOX 1776
PO BOX 1776
TAMPA, FL 33601 US**New Mailing Address:****FEI Number:** 59-3054862 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CAROL A COFFEY
360 CENTRAL AVE
ST PETERSBURG, FL 33701 US**Name and Address of New Registered Agent:**DEBRA A. WOODWARD
14840 49TH ST NORTH
CLEARWATER, FL 33762 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: DEBRA A. WOODWARD

04/26/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** S () Delete
Name: BARTON, JILL
Address: 7401 CYPRESS GARDENS BLVD
City-St-Zip: WINTER HAVEN, FL 33888**Title:** P () Delete
Name: BECK, SANDRA
Address: 4305 21ST AVE E
City-St-Zip: TAMPA, FL 33605**Title:** VP () Delete
Name: RHOADS, JENNIFER
Address: 1001 E PALM AVE
City-St-Zip: TAMPA, FL 33605**Title:** D () Delete
Name: CROSS, WILLIAM DR
Address: 16313 N DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618**Title:** D () Delete
Name: KLIMECK, LOIS
Address: 5501 W GRAY ST
City-St-Zip: TAMPA, FL 336091007**Title:** T () Delete
Name: CAROL A COFFEY,
Address: 360 CENTRAL AVE
City-St-Zip: ST PETERSBURG, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: BARTON, JILL
Address: 7401 CYPRESS GARDENS BLVD
City-St-Zip: WINTER HAVEN, FL 33888**Title:** VP (X) Change () Addition
Name: BECK, SANDRA
Address: 4305 21ST AVE E
City-St-Zip: TAMPA, FL 33605**Title:** S (X) Change () Addition
Name: LARSON, BETSY
Address: 880 CARILLON PARKWAY
City-St-Zip: ST. PETERSBURG, FL 3333716**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** T (X) Change () Addition
Name: WOODWARD, DEBRA
Address: 14840 49TH ST. NORTH
City-St-Zip: CLEARWATER, FL 33762**Title:** D (X) Change () Addition
Name: CAROL A COFFEY,
Address: 360 CENTRAL AVE
City-St-Zip: ST PETERSBURG, FL

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: CAROL A. COFFEY

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date