2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741972

FILED Jan 21, 2009 Secretary of State

Entity Name: FLORIDA OUTDOOR ADVERTISING ASSOCIATION, INC.

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
|---|---|------------------------------------|---------|--|--------------------------|--|-----------|
| | H GADSDEN S | STREET | | | | | |
| SUITE 1 TALLAHAS | SEE, FL 3230 | 01 US | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| 314 NORTH GADSDEN STREET | | | | | | | |
| SUITE 1 TALLAHAS | SEE, FL 32301 US | | | | | | |
| FEI Number: | | FEI Number Applied For () | FEI Nun | nber Not Appli | cable () | Certificate of Status Desired () | |
| Name and | Address of C | urrent Registered Agent: | | Name and | Address of | New Registered Agent: | |
| BRAND, CHARLOTTE P 314 NORTH GADSDEN STREET SUITE 1 TALLAHASSEE, FL 32301 US | | | | AUDIE, CHARLOTTE B 314 NORTH GADSDEN STREET | | | |
| | | | | | | | |
| | | | | The above r | | submits this statement for the p | ourpose o |
| SIGNATURE: CHARLOTTE BRAND AUDIE Electronic Signature of Registered Agent | | | | 01/21/2009 Date | | | |
| | | | | | | | |
| Title: Name: Address: City-St-Zip: | PD () BROWN, TODD P.O. BOX 385 OXFORD, FL 3 | | | Title: Name: Address: City-St-Zip: | (| () Change () Addition | |
| Title: Name: Address: City-St-Zip: | BRAND, CHARL | DSDEN STREET, SUITE 1 | | Title: Name: Address: City-St-Zip: | AUDIE, CHAR 314 NORTH | (X) Change()Addition RLOTTE B GADSDEN STREET, SUITE 1 EE, FL 32301 US | |
| Title: Name: Address: City-St-Zip: | KITTO, KEVIN POST OFFICE I | Delete 3OX 99 N, FL 33851 US | | Title: Name: Address: City-St-Zip: | (| ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | VD () LITTLE, JOE 6904 CYPRESS TAMPA, FL 336 | | | Title: Name: Address: City-St-Zip: | (| ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | SD () MCINTRYE, LAI 2890 HARPER I MELBOURNE, F | ROAD | | 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: TODD BROWN PD 01/21/2009