

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744233

FILED
Apr 11, 2007
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF COUNTIES, INC.

Current Principal Place of Business:

100 SO MONROE STR
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 549
TALLAHASSEE, FL 323020549 US

New Mailing Address:

FEI Number: 59-1914707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELEGAL, VIRGINIA S ESQ
C/O FLORIDA ASSOCIATION OF COUNTIES
100 S MONROE STREET
TALLAHASSEE, FL 32301 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: VD () Delete
Name: LATVALA, SUSAN
Address: 315 COURT STREET
City-St-Zip: CLEARWATER, FL 33756

Title: VD () Delete
Name: JACOBS, TERESA
Address: 201 SOUTH ROSALIND
City-St-Zip: ORLANDO, FL 32801

Title: PP () Delete
Name: THAELL, CLIFF
Address: 301 SOUTH MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: VP () Delete
Name: HATCH, RANDY
Address: 224 PINE AVENUE
City-St-Zip: LIVE OAK, FL 32064

Title: P () Delete
Name: CADWELL, WELTON G
Address: 315 W. MAIN ST.
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LATVALA, SUSAN
Address: 315 COURT STREET
City-St-Zip: CLEARWATER, FL 33756

Title: PE (X) Change () Addition
Name: JACOBS, TERESA
Address: 201 SOUTH ROSALIND
City-St-Zip: ORLANDO, FL 32801

Title: 2 VP (X) Change () Addition
Name: LONG, RODNEY
Address: 12 SE 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: 1 VP (X) Change () Addition
Name: HATCH, RANDY
Address: 224 PINE AVENUE
City-St-Zip: LIVE OAK, FL 32064

Title: IPP (X) Change () Addition
Name: CADWELL, WELTON G
Address: 315 W. MAIN ST.
City-St-Zip: TAVARES, FL 32778

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: SUSAN LATVALA

P

04/11/2007

Electronic Signature of Signing Officer or Director

Date