

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744233

FILED  
Feb 29, 2012  
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:**

100 S. MONROE STREET  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

100 SO MONROE STR  
TALLAHASSEE, FL 32301 US

**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: P  
Name: SMITH, DOUG  
Address: 2401 MONTEREY ROAD  
City-St-Zip: STUART, FL 34996

Title: PE  
Name: WILLIAMS, BILL  
Address: 1000 CECIL G. COSTIN SR BLVD.  
City-St-Zip: PORT ST. JOE, FL 32456

Title: 1 VP  
Name: DESLOGE, BRYAN  
Address: 301 S MONROE STREET  
City-St-Zip: TALLAHASSEE, FL 32301

Title: 2 VP  
Name: WELCH, KENNETH  
Address: 315 COURT STREET  
City-St-Zip: CLEARWATER, FL 33736

Title: IPP  
Name: LIEBERMAN, ILENE  
Address: 115 S ANDREWS AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33301

I hereby 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 all other like empowered.

**SIGNATURE:** VIRGINIA S. DELEGAL

GC

02/29/2012

Electronic Signature of Signing Officer or Director

Date