

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744975

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF COURT CLERKS, INC.

## Current Principal Place of Business:

3544 MACLAY BLVD.  
TALLAHASSEE, FL 32312

## New Principal Place of Business:

## Current Mailing Address:

3544 MACLAY BLVD.  
TALLAHASSEE, FL 32312

## New Mailing Address:

FEI Number: 59-1227589

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAGGETT, FRED W.  
101 E. COLLEGE AVE.  
TALLAHASSEE, FL., FL 32302 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: S ( ) Delete  
Name: FULLER, JIM  
Address: 330 EAST BAY ST., ROOM 103  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: T ( ) Delete  
Name: SMITH, TIM  
Address: 410 ST. JOHNS AVENUE  
City-St-Zip: PALATKA, FL 32177 US

Title: P ( ) Delete  
Name: LYONS, RICKY  
Address: P. O. BOX 88  
City-St-Zip: MAYO, FL 32066 US

Title: VP ( ) Delete  
Name: RUSHING, KAREN  
Address: P.. O. BOX 3079  
City-St-Zip: SARASOTA, FL 34230 US

Title: VP ( ) Delete  
Name: CASON, DEWITT  
Address: P. O. DRAWER 2069  
City-St-Zip: LAKE CITY, FL 32056 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: FULLER, JIM  
Address: 330 EAST BAY ST., ROOM 103  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: S (X) Change ( ) Addition  
Name: SMITH, TIM  
Address: 410 ST. JOHNS AVENUE  
City-St-Zip: PALATKA, FL 32177 US

Title: T (X) Change ( ) Addition  
Name: BURKE, KEN  
Address: 315 COURT STREET  
City-St-Zip: CLEARWATER, FL 33756 US

Title: P (X) Change ( ) Addition  
Name: RUSHING, KAREN  
Address: P.. O. BOX 3079  
City-St-Zip: SARASOTA, FL 34230 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TIM SMITH

S

01/09/2008

Electronic Signature of Signing Officer or Director

Date