

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 27, 2006 8:00 am
Secretary of State

06-27-2006 90035 013 ****70.00

DOCUMENT # 748726 1. Entity Name FLORIDA POWER EMPLOYEES ASSOCIATION					
Principal Place of Business BREWSTER, DIANA L 3324 HOLIDAY AVE APOPKA, FL 32703 US			Mailing Address BREWSTER, DIANA 3324 HOLIDAY AVE APOPKA, FL 32703 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-0970195	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HODGE, AMY 3324 HOLIDAY AVE APOPKA, FL 32703			Name Amy DeZonia Street Address (P.O. Box Number is Not Acceptable) 3324 Holiday Ave City Apopka FL Zip Code 32703		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Amy DeZonia</i></u> <u><i>Amy DeZonia, Treasurer</i></u> <u><i>6/13/06</i></u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HENSLEY, JOHN 1421 HILLWAY ROAD APOPKA, FL 32703	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HODGE, AMY 3300 EXCHANGE PL NP4A LAKE MARY, FL 32746	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer DeZonia, Amy 3300 Exchange Pl. NP4A Lake Mary, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WRIGHT, MICHAEL 504 SAGE CREEK CT WINTER SPRINGS, FL 32708	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POUNDERS, LINDA 1126 MARTEX DRIVE APOPKA, FL 32703	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARPER, JEFFREY 540 HAVER LAKE CIR APOPKA, FL 32712	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Jason Clark 150 Progress Energy Way Longwood FL 32750
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.					
SIGNATURE: <u><i>Amy DeZonia</i></u> <u><i>6/13/06</i></u> <u><i>407-942-9245</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					