

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 08, 2009
Secretary of State

DOCUMENT# 750176

Entity Name: FLORIDA ADVISORY COMMITTEE ON ARSON PREVENTION, INC.**Current Principal Place of Business:**3625 NW 82ND AVENUE
SUITE 306
MIAMI, FL 33166**New Principal Place of Business:**200 COLONIAL CENTER PARKWAY
SUITE 320
LAKE MARY, FL 32746**Current Mailing Address:**3625 NW 82ND AVENUE
SUITE 306
MIAMI, FL 33166**New Mailing Address:**200 COLONIAL CENTER PARKWAY
SUITE 320
LAKE MARY, FL 32746**FEI Number:** 59-1743445**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COWHEARD, DAVID
3625 NW 82 AVENUE
SUITE 306
MIAMI, FL 33166 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 () Delete
Name: FACTOR, MAX G
Address: 3600 MASCLAY BLVD. SUITE 101
City-St-Zip: TALLAHASSEE, FL 33132

Title: S () Delete
Name: SLAWIAK, BARBARA
Address: 19046 BRUCE B DOWNS BLVD
City-St-Zip: TAMPA, FL 33647

Title: T () Delete
Name: DAVID, COWHEARD
Address: 3625 NW 82ND AVENUE SUITE 306
City-St-Zip: MIAMI, FL 33166

Title: VP () Delete
Name: SMALLWOOD, JIM
Address: 3862 QUADRANGLE BLVD. SUITE 100
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMALLWOOD, JIM
Address: 3862 QUADRANGLE BLVD SUITE 100
City-St-Zip: ORLANDO, FL 32817

Title: S (X) Change () Addition
Name: VOELPEL, JOHN A IV
Address: 2212 CURRY FORD ROAD
City-St-Zip: ORLANDO, FL 32806

Title: T (X) Change () Addition
Name: ELKIND, KRISTINE
Address: 200 COLONIAL CENTER PARKWAY, SUITE 320
City-St-Zip: LAKE MARY, FL 32746

Title: VP (X) Change () Addition
Name: BACKMAN, STEVE
Address: 19046 BRUCE DOWNS BLVD
City-St-Zip: TAMPA, FL 33647

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: DAVID COWHEARD

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12/08/2009

Electronic Signature of Signing Officer or Director

Date