

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756766

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA ASSOCIATION OF DIRECTORS OF VOLUNTEER SERVICES, INCORPORATED

**Current Principal Place of Business:**

710 SW ST. LUCIE CRES  
STUART, FL 34994 US

**New Principal Place of Business:**

38 BENNETT LANE  
PALM COAST, FL 32137 US

**Current Mailing Address:**

710 SW ST. LUCIE CRES  
STUART, FL 34994 US

**New Mailing Address:**

38 BENNETT LANE  
PALM COAST, FL 32137 US

**FEI Number:** 59-2147483

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARNOLD, LINDA  
710 SW ST LUCIE CRES  
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

LUGO, CLARA  
38 BENNETT LANE  
PALM COAST, FL 32137 US

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: CLARA LUGO

03/02/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PHILLIPS, ANGELA  
Address: 92 WEST MILLER STREET  
City-St-Zip: ORLANDO, FL 32806

Title: VPD  
Name: ARNOLD, LINDA  
Address: P. O. BOX 9010  
City-St-Zip: STUART, FL 34995

Title: T  
Name: LUGO, CLARA  
Address: 38 BENNETT LANE  
City-St-Zip: PALM COAST, FL 32137

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: CLARA LUGO

TREA

03/02/2010

Electronic Signature of Signing Officer or Director

Date