2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#763198

Apr 24, 2006 Secretary of State

Entity Name: FLORIDA ASSOCIATION FOR VOLUNTEER ACTION IN THE CARIBBEAN AND THE AMERICAS, INC

Current Principal Place of Business: New Principal Place of Business: 1310 N PAUL RUSSELL ROAD TALLAHASSEE, FL 32301 **Current Mailing Address: New Mailing Address:** 1310 N PAUL RUSSELL ROAD TALLAHASSEE, FL 32301 FEI Number: 59-2215229 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VALLS, JULIETA PRESIDE SHARKEY, JEFFREY INTERIM 1310 N. PÁUL RUSSELL ROAD 1310 N. PAUL RUSSELL ROAD TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 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: JEFFREY SHARKEY 04/24/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KOCOUREK, TODD CHAIRMA Name: Name: 1310 N. PAUL RUSSELL ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: Title: (X) Change () Addition () Delete MILLIGAN, ROBERT VICE CH Name: SEAMON, FRED VICE CH Name: Address: 1310 N PAUL RUSSELL ROAD Address: 1310 N PAUL RUSSELL ROAD City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301 Title: () Delete Title: () Change () Addition SCHLAKMAN, MARK SECRET Name: Name: 1310 N PAUL RUSSELL ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: TD () Delete Title: TD (X) Change () Addition SEAMON, FRED TREASUR MOISE, RUDOLPH TREASUR Name: Name: 2123 CENTRE POINT BLVD 1310 N PAUL RUSSELL ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301 Title: () Delete Title: () Change () Addition SHARKEY, JEFFERY PAST CH Name: Name: 106 E. COLLEGE AVENUE Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: () Delete Title: () Change () Addition BOUTWELL, W.K. Name: Name: Address: 2123 CENTRE POINT BLVD Address: TALLAHASSEE, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY SHARKEY INTE 04/24/2006