2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2012
Secretary of State

DOCUMENT# 763198

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

Current Principal Place of Business:

1310 N PAUL RUSSELL ROAD
TALLAHASSEE, FL 32301

New Principal Place of Business:

1020 E LAFAYETTE ST., STE 213
TALLAHASSEE, FL 32301

Current Mailing Address:

1310 N PAUL RUSSELL ROAD
TALLAHASSEE, FL 32301

New Mailing Address:

1020 E LAFAYETTE ST., STE 213
TALLAHASSEE, FL 32301

FEI Number: 59-2215229 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PASQUARELLI, DEMIAN
1310 N. PAUL RUSSELL ROAD
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

PASQUARELLI, DEMIAN
1020 E LAFAYETTE ST., STE 213
TALLAHASSEE, FL 32301 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: DEMIAN PASQUARELLI 03/21/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: SCHLAKMAN, MARK CHAIR
Address: 426 W. JEFFERSON STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: SEAMON, FRED PAST CH
Address: 2123 CENTRE POINTE BLVD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: PALOMO, GUILLERMO V-CHAIR
Address: 2654 NW 97TH AVENUE
City-St-Zip: MIAMI, FL 33172

Title: D
Name: ROSE, AARON TREASUR
Address: 4051 GILMAN AVENUE, WEST $304
City-St-Zip: SEATTLE, WA 98199

Title: D
Name: HILL, MARLON SECRETA
Address: 200 S. BISCAYNE BLVD, #2750
City-St-Zip: MIAMI, FL 33131

Title: ED
Name: PASQUARELLI, DEMIAN
Address: 1020 E LAFAYETTE ST., STE 213
City-St-Zip: TALLAHASSEE, FL 32301

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: DEMIAN PASQUARELLI ED 03/21/2012
Electronic Signature of Signing Officer or Director Date