

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770671

FILED
Mar 05, 2009
Secretary of State

Entity Name: FLORIDA AQUACULTURE ASSOCIATION, INC.

Current Principal Place of Business:

316 W. CENTRAL AVE
WINTER HAVEN, FL 33880 US

New Principal Place of Business:

316 W. CENTRAL AVE
#200
WINTER HAVEN, FL 33880 US

Current Mailing Address:

P.O. BOX 1519
WINTER HAVEN, FL 33882

New Mailing Address:

FEI Number: 59-2335313 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BOOZER, DAVID
316 W CENTRAL AVE STE 200
WINTER HAVEN, FL 33882 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: D () Delete
Name: LEONARD, DAN
Address: 7228 SUNNYBROOK BLVD
City-St-Zip: ENGLEWOOD, FL 34224

Title: PD () Delete
Name: TANNER, MARTY
Address: 218 SO WEBB RD
City-St-Zip: PLANT CITY, FL

Title: DVP () Delete
Name: EVANS, GENE
Address: 1200 S LEAVITT AVE
City-St-Zip: ORANGE CITY, FL 32763

Title: TD () Delete
Name: SOLANO, DANIEL
Address: 11227 E. RIVERVIEW DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: BRYNE, DONALD
Address: RT. 14 BOX 36
City-St-Zip: LAKE CITY, FL

Title: D () Delete
Name: DAVIS, MEGAN
Address: 5600 US 1 NORTH
City-St-Zip: FORT PIERCE, FL 34946

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOFF, FRANK
Address: 33418 OLD ST. JOE ROAD
City-St-Zip: DADE CITY, FL 33525

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARTY TANNER

DP

03/05/2009

Electronic Signature of Signing Officer or Director

_____ Date