

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003949

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: FLORIDA INTERNATIONAL ASSOCIATES, INC. WY

**Current Principal Place of Business:**

430 NE 1ST AVE.  
SUITE A-D  
HIGH SPRINGS, FL 32643

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 2324  
HIGH SPRINGS, FL 32655

**New Mailing Address:**

FEI Number: 59-2955446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PALETTI, TIMOTHY M  
2010 SOUTH MAIN STREET  
HIGH SPRINGS, FL 32643 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CBOD ( ) Delete  
Name: PALETTI, TIMOTHY M CEO  
Address: 430 NE 1ST AVE., STE D  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: BOD ( ) Delete  
Name: PALETTI, MARK C VP  
Address: 430 NE 1ST AVE., STE D  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: BOD ( ) Delete  
Name: PALETTI, JONATHAN D VP  
Address: 1431 22 AVE N  
City-St-Zip: ST PETERSBURG, FL 33704

Title: VP ( ) Delete  
Name: WILLIAMSON, BILL W VP  
Address: 5710 S. PENDANT PT.  
City-St-Zip: FLORAL CITY, FL 34436

Title: VP ( ) Delete  
Name: MORDAL, RICHARD VP  
Address: 430 NE 1ST AVE # D  
City-St-Zip: HIGH SPRINGS, FL 32643

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY M. PALETTI

CEO

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date