

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L74256

Entity Name: FLORIDA TAX INSTITUTE, INC.

FILED  
Apr 22, 2010  
Secretary of State

**Current Principal Place of Business:**

1635 S RIDGEWOOD AVE  
STE 213  
SOUTH DAYTONA, FL 32119

**New Principal Place of Business:**

119 S. PALMETTO AVENUE  
STE 118  
DAYTONA BEACH, FL 32114

**Current Mailing Address:**

1635 S RIDGEWOOD AVE  
STE 213  
SOUTH DAYTONA, FL 32119

**New Mailing Address:**

119 S. PALMETTO AVENUE  
STE 118  
DAYTONA BEACH, FL 32114

FEI Number: 59-3010302

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RHYNARD, M. A.  
515 S RIDGEWOOD AVE  
DAYTONA BEACH, FL 32114 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: PD  
Name: CROSS, LAWRENCE L  
Address: 119 S. PALMETTO AVENUE, #118  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: SEC  
Name: RHYNARD, M A  
Address: 515 S RIDGEWOOD AVENUE  
City-St-Zip: DAYTONA BCH, FL 32114

Title: VP  
Name: CROSS, CAROL A  
Address: 119 S.PALMETTO AVENUE, #118  
City-St-Zip: DAYTONA BEACH, FL 32114

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

SIGNATURE: LAWRENCE L. CROSS

PD

04/22/2010

Electronic Signature of Signing Officer or Director

Date