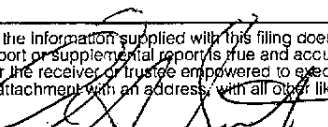


FILED
Jan 21, 2005 08:00 AM
Secretary of State

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N00000007935			
1. Entity Name FLORIDA ADMINISTRATORS OF VOLUNTEERS IN GOVERNMENT, INC.			
Principal Place of Business 4111 LAND O' LAKES BLVD STE 202 LAND O LAKES, FL 34639	Mailing Address 4111 LAND O' LAKES BLVD STE 202 LAND O LAKES, FL 34639		
DO NOT WRITE IN THIS SPACE			
			
		01062005 No Chg-NP CR2E037 (10/03)	
		4. FEI Number 59-3388789	Applied For Not Applicable
		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
BUSCETTA, VINCENT 4111 LAND O' LAKES BLVD STE 202 LAND O LAKES, FL 34639		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	P OSBOURNE-PONSI, HELENA		
NAME	P.O. BOX 7800		
STREET ADDRESS	TAVARES, FL 32778		
CITY-ST-ZIP			
TITLE	D RAY, MONA		
NAME	1040 SOUTH FLORIDA AVE		
STREET ADDRESS	ROCKLEDGE, FL 32955		
CITY-ST-ZIP			
TITLE	S HUMPHRIES, JANET		
NAME	DRAWER CA03 PO BOX 9005		
STREET ADDRESS	BARTOW, FL 33831		
CITY-ST-ZIP			
TITLE	D DAVIDSON, PAULETTE		
NAME	2725 JUDGE FRAN JAMIESON WAY		
STREET ADDRESS	VIERRA, FL 32904		
CITY-ST-ZIP			
TITLE	T BUSCETTA, VINCENT		
NAME	4111 LAND O' LAKES BLVD		
STREET ADDRESS	LAND O' LAKES, FL 3439		
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  VINCENT BUSCETTA Date: 1/4/05 727-858-0951-CELL			