## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0100000384

FILED Jaņ 15, 2<u>00</u>9 Secretary of State

Entity Name: FLORIDA LOCAL ENVIRONMENTAL RESOURCE AGENCIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

719 EAST PARK AVENUE TALLAHASSEE, FL 32301

**Current Mailing Address: New Mailing Address:** 

719 EAST PARK AVENUE P.O. BOX 10530

TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32302

FEI Number: 59-3708514 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SPITZER, KURT 719 EAST PARK AVE 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

SQUIRES, ANDY CUNNIFF, LORI Name: Name: 512 FT. SOUTH HARRISON AVE. Address: 800 MERCY DR., STE.4 Address: City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: ORLANDO, FL 32808 US

Title: Title: (X) Change ( ) Addition ( ) Delete

CUNNIFF, LORI Name: BROWN, ROB Name: Address: 800 MERCY DR. #4 Address: 202 6TH AVE. EAST City-St-Zip: ORLANDO, FL 32808 US City-St-Zip: BRADENTON, FL 34208 US

Title: () Delete Title: (X) Change ( ) Addition BROWN, ROB GUJJARLAPUDI, EBENEZER Name: Name: 202 6TH AVE. EAST 117 W. DUVAL ST., STE 225 Address: Address: City-St-Zip: BRADENTON, FL 34208 US City-St-Zip: JACKSONVILLE, FL 32202 US

Title: ( ) Delete Title: D (X) Change ( ) Addition

Name: GARRITY, RICK Name: SQUIRES, ANDY

3629 QUEEN PALM DRIVE 512 S. FORT HARRISON AVE. Address: Address: City-St-Zip: TAMPA, FL 33619 City-St-Zip: CLEARWATER, FL 33756

Title: ( ) Delete Title: () Change () Addition

SPITZER, KURT Name: Name: 719 E. PARK AVE. Address: Address:

City-St-Zip: TALLAHASSEE, FL 32301 US 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: KURT SPITZER D 01/15/2009