2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003354

FILED Jan 04, 2008 Secretary of State

Entity Name: FLORIDA WRITERS ASSOCIATION, INC.

| | Principal Place of | Business: | New Principal Pla | ace of Business: | |
|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|--|
| | COTS AVENUE ISLAND, FL 3295 | 52 US | | | |
| urrent Mailing Address: | | | New Mailing Add | New Mailing Address: | |
| | COTS AVE ISLAND, FL 3295 | 52 US | | | |
| El Number | r: 59-3712917 F | El Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| ame and | d Address of Curr | rent Registered Agent: | Name and Addres | ss of New Registered Agent: | |
| 15 EAST | RECT AGENTS, ING PARK AVENUE SSEE, FL 32301 | C. US | | | |
| | e named entity subr e of Florida. | mits this statement for the | purpose of changing its regist | ered office or registered agent, or both, | |
| IGNATU | RE: | | | | |
| | Electronic S | Signature of Registered A | gent | Date | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHA | ADDITIONS/CHANGES TO OFFICERS AND DIRECTO | | |
| le: ime: dress: | P () Delo GRIFFITH, DANIEL 1345 E SCOTS AVE | W | Title: Name: Address: | () Change () Addition | |
| | MERRITT ISLAND, I | FL 32952 US | City-St-Zip: | | |
| ty-St-Zip: tle: ame: ddress: ty-St-Zip: | | lete `Y | City-St-Zip: Title: Name: Address: City-St-Zip: | ()Change()Addition | |
| ty-St-Zip: :le: ame: ldress: | MERRITT ISLAND, I VP () Dele JACKSON, CHRISS P O BOX 66069 | lete SY FL 33736 US lete NUE | Title: Name: Address: | () Change () Addition () Change () Addition | |
| ty-St-Zip: lle: ame: ldress: ty-St-Zip: lle: ame: ldress: | MERRITT ISLAND, I VP () Dele JACKSON, CHRISS P O BOX 66069 ST PETE BEACH, F T () Dele LINNE', ANNE 1832 SW 105 AVEN | lete SY FL 33736 US lete NUE JS lete RIVE, NE | Title: Name: Address: City-St-Zip: Title: Name: Address: | • , | |
| y-St-Zip: le: me: dress: y-St-Zip: le: me: dress: y-St-Zip: le: me: dress: y-St-Zip: le: me: dress: | MERRITT ISLAND, I VP () Dele JACKSON, CHRISS P O BOX 66069 ST PETE BEACH, F T () Dele LINNE', ANNE 1832 SW 105 AVEN DAVIE, FL 33324 U S () Dele SMOCK, SHARA 901 WATEROAK DE | lete EY EL 33736 US lete NUE US lete RIVE, NE 005 US | Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: D Name: VIC, DIG Address: 602 MIF | () Change () Addition () Change () Addition (X) Change () Addition | |

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: DANIEL W GRIFFITH P 01/04/2008