

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003354

FILED
Jan 18, 2012
Secretary of State

Entity Name: FLORIDA WRITERS ASSOCIATION, INC.

Current Principal Place of Business:

400 64TH AVE,
#1006
ST. PETE BEACH, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 66069
ST. PETE BEACH, FL 33736 US

New Mailing Address:

FEI Number: 59-3712917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: PD
Name: JACKSON, CHRISSY
Address: P O BOX 66069
City-St-Zip: ST. PETE BEACH, FL 33736 US

Title: VD
Name: BODIE, LEONA
Address: 1260 SW 25TH LN
City-St-Zip: PALM CITY, FL 34990 US

Title: TD
Name: SUAREZ, ANN
Address: PO BOX 351029
City-St-Zip: GRAND ISLAND, FL 32735 US

Title: SD
Name: SENECA, ELAINE
Address: 224 BROADVIEW DR
City-St-Zip: COCOA, FL 32922 US

Title: D
Name: VIC, DIGENTI
Address: 602 MIRAMAR COURT
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: D
Name: ORLANDO, EUGENE
Address: 3103 CLOVEWOOD PL
City-St-Zip: SEFFNER, FL 33584 US

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

SIGNATURE: ANN W. SUAREZ

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01/18/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date