

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008761

FILED
Apr 03, 2008
Secretary of State

Entity Name: FLORIDA COLLECTORS ASSOCIATION, INC.

Current Principal Place of Business:

7805 SE 170TH RUTLEDGE ST.
THE VILLAGES, FL 32162

New Principal Place of Business:

Current Mailing Address:

7805 SE 170TH RUTLEDGE ST.
THE VILLAGES, FL 32162

New Mailing Address:

FEI Number: 59-6178150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROTTICELLI, SABER
7805 SE 170TH RUTLEDGE ST.
THE VILLAGES, FL 32162 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: PPRE () Delete
Name: KINGGARD, KATHY
Address: 5808 NW 11TH ST. #220
City-St-Zip: MIAMI, FL 33126

Title: PRES () Delete
Name: CURT, FLYNN
Address: 134 S TAMPA ST
City-St-Zip: TAMPA, FL 33602

Title: PELE (X) Delete
Name: HALL, MANDY
Address: 2066 14TH AVE #200
City-St-Zip: VERO BEACH, FL 32960

Title: SEC () Delete
Name: SABER, GROTTICELLI
Address: 7805 SE 170TH RUTLEDGE ST
City-St-Zip: THE VILLAGES, FL 32162

Title: D (X) Delete
Name: ROCKHILL, JOHN
Address: 2066 14TH AVENUE #200
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MANDY, HALL
Address: 7805 SE 170TH RUTLEDGE ST
City-St-Zip: THE VILLAGES, FL 32162

Title: PPRE (X) Change () Addition
Name: CURT, FLYNN
Address: 134 S TAMPA ST
City-St-Zip: TAMPA, FL 33602

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SABER GROTTICELLI

SEC

04/03/2008

Electronic Signature of Signing Officer or Director

Date