2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000940

FILED Jan 07, 2005 Secretary of State

Entity Name: FLORIDA GROUND TRANSPORTATION ASSOCIATION, INC.

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

5145 75TH STREET NORTH P.O. BOX 770883

ST. PETERSBURG, FL 33782 ORLANDO, FL 32877-088

Current Mailing Address: New Mailing Address:

PO BOX 16226

CLEARWATER, FL 337666226

FEI Number: 01-0678346 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:

MONGELLO, GUY J
5145 75TH STREET NORTH
5145 7

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: 01/07/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MONGELLO, GUY J
 Name:
 PALIE, GREGORY

 Address:
 5145 75TH STREET NORTH
 Address:
 P.O. BOX 770883

City-St-Zip: ST. PETERSBURG, FL 33709 City-St-Zip: ORLANDO, FL 328770883

 Name:
 PALIE, GREGORY
 Name:
 TERRANOVA, RANDY

 Address:
 P O BOX 770883
 Address:
 P O BOX 770883

City-St-Zip: ORLANDO, FL 328770883 City-St-Zip: ORLANDO, FL 328770883

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

Name: THOMPSON, SALLY Name:

 Address:
 10220 NEW BERLIN RD, SUITE 100
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32226
 City-St-Zip:

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

 Name:
 BORODAY, CARLA
 Name:

 Address:
 4740 NW 15TH AVE
 Address:

 City-St-Zip:
 FT LAUDERDALE, FL 33309
 City-St-Zip:

 Name:
 MEKLER, IRU
 Name:
 MEKLER, IRV

 Address:
 PO BOX 16226
 Address:
 PO BOX 16226

City-St-Zip: CLEARWATER, FL 337666226 City-St-Zip: CLEARWATER, FL 337666226

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GREGORY PALIE P 01/07/2005