2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003957

FILED Jan 06, 2010 Secretary of State

Entity Name: FSMTA ASSOCIATION SERVICES, INC.

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

1870 ALOMA AVENUE SUITE 260

WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

1870 ALOMA AVENUE SUITE 260 WINTER PARK, FL 32789

FEI Number: 81-0555115 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:

HUPP, LYNN 1870 ALOMA AVENUE SUITE 260 WINTER PARK, FL 32789 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

in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD

Name: MCCONNELL, DEBORAH D

Address: 14505 CYPRESS TRACE COURT #203

City-St-Zip: FORT MYERS, FL 33919

Title: VD

Name: PADGETT, MARION
Address: 1107 IOWA AVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: TD

Name: ANDERSON, TERRY Address: 2233 HARRISON DR City-St-Zip: HOLIDAY, FL 34691

Title: M

Name: HUPP, LYNN

Address: 1870 ALOMA AVENUE SUITE 260 City-St-Zip: WINTER PARK, FL 32789

Title: PD

 Name:
 GILBERT, MAUREEN

 Address:
 3122 RIVER VILLA WAY

 City-St-Zip:
 MELBOURNE BEACH, FL 32951

Title: SD

Name: LEHNERTZ, HEATHER
Address: 325 PINE TREE DR
City-St-Zip: INDIALANTIC, FL 32903

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: LYNN HUPP ED 01/06/2010