## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000004645

Apr 23, 2008 Secretary of State

Entity Name: FLORIDA FUTURE BUSINESS LEADERS OF AMERICA/PHI BETA LAMBDA FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1219 BRANDA VISTA DR BRANDON, FL 33510 **Current Mailing Address: New Mailing Address:** 1219 BRANDA VISTA DR BRANDON, FL 33510 FEI Number: 04-3691181 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PIERCE, RONALD 1219 BRANDA VISTA DR BRANDON, FL 33510 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PIERCE, RONALD W Name: Name: 1219 BRANDA VISTA DRIVE Address: Address: BRANDON, FL 33510 City-St-Zip: City-St-Zip: Title: DS () Delete Title: (X) Change ( ) Addition DS Name: CLAITT, RAQUSITA Name: MCRAE, SYLVIA MCCOY Address: P.O. BOX 6412 Address: 4801 N.22ND STREET City-St-Zip: TALLAHASSEE, FL 32314 City-St-Zip: TAMPA, FL 33610 Title: () Delete Title: () Change () Addition HUBBARD, BRENDA Name: Name: Address: P.O. BOX 5437 Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: DV ( ) Delete Title: DV (X) Change ( ) Addition Name: BARROW, LYNDA Name: DURSO, JOE 401 JACKSON STREET, SUITE 2500 Address: Address: 301 TULLIS AVENUE City-St-Zip: TAMPA, FL 33601 City-St-Zip: LONGWOOD, FL 32750

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: RONALD W. PIERCE DP 04/23/2008