

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005150

FILED
Jan 07, 2012
Secretary of State

Entity Name: FLORIDA MARINE SCIENCE EDUCATORS ASSOCIATION, INC.

Current Principal Place of Business:

C/O LAUREN TYLER
630 45TH AVE N
ST PETERSBURG, FL 33703

New Principal Place of Business:

Current Mailing Address:

C/O LAUREN TYLER
630 45TH AVE N
ST PETERSBURG, FL 33703

New Mailing Address:

FEI Number: 02-0638324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHREWSBURY, FRANCIS L CPA
21525 TRUMPETER DR
LAND O'LAKES, FL 346394449 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: DP
Name: HAMILTON, SARA
Address: 630 45TH AVE N
City-St-Zip: ST PETERSBURG, FL 33703

Title: DV
Name: HAMILTON, SARA
Address: 630 45TH AVE N
City-St-Zip: ST PETERSBURG, FL 33703

Title: DS
Name: SHIELDS, ANN MARIE
Address: 630 45TH AVE N
City-St-Zip: ST PETERSBURG, FL 33703

Title: DM
Name: LEWIS, MELLIE
Address: 630 45TH AVE N
City-St-Zip: ST PETERSBURG, FL 33703

Title: DT
Name: TYLER, LAUREN M
Address: 630 45TH AVE N
City-St-Zip: ST PETERSBURG, FL 33703

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: LAUREN M. TYLER

DT

01/07/2012

Electronic Signature of Signing Officer or Director

Date