


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2007 08:00 AM
Secretary of State

| | |
|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # N02000006089 1. Entity Name FLORIDA WOODTURNING SYMPOSIUM INC. |  |
|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

| | |
|-------------------------------------------------------------------------|-------------------------------------------------------------|
| Principal Place of Business 111 E KELLER CT HERNANDO, FL 34442 US | Mailing Address 111 E KELLER CT HERNANDO, FL 34442 US |
|-------------------------------------------------------------------------|-------------------------------------------------------------|

DO NOT WRITE IN THIS SPACE



01292007 No Chg-NP CR2E037 (4/06)

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 11-3650246 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SOSPENZI, FRANK
 111 E KELLER CT
 HERNANDO, FL 34442

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000616918
 02/07/07-80052-019 61.25

| 10. OFFICERS AND DIRECTORS | |
|------------------------------------------------|-----------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CD COLE, ALLEN 108 HORSESHOE BEND DE LEON SPRINGS, FL 32130 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD SOSPENZI, FRANK 111 E KELLER CT HERNANDO, FL 34442 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD ALBRIGHT, HOLLY 1391 CHELSEA DR. TARPON SPRINGS, FL 34689 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frank Sospenzi 1/30/2007 352-746-5805

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #