

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 01, 2009  
Secretary of State**

DOCUMENT# N02000006089

Entity Name: FLORIDA WOODTURNING SYMPOSIUM INC.

**Current Principal Place of Business:**

111 E KELLER CT  
HERNANDO, FL 34442 US

**New Principal Place of Business:**

**Current Mailing Address:**

111 E KELLER CT  
HERNANDO, FL 34442 US

**New Mailing Address:**

FEI Number: 11-3650246      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SOSPENZI, FRANK  
111 E KELLER CT  
HERNANDO, FL 34442 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: CD ( ) Delete  
Name: COLE, ALLEN  
Address: 108 HORSESHOE BEND  
City-St-Zip: DE LEON SPRINGS, FL 32130

Title: TD ( ) Delete  
Name: SOSPENZI, FRANK  
Address: 111 E KELLER CT  
City-St-Zip: HERNANDO, FL 34442

Title: SD ( ) Delete  
Name: ALBRIGHT, HOLLY  
Address: 1391 CHELSEA DR.  
City-St-Zip: TARPON SPRINGS, FL 34689

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD (X) Change ( ) Addition  
Name: JOHNSON, READ  
Address: 3236 1ST ST SW  
City-St-Zip: VERO BEACH, FL 32968 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: FRANK SOSPENZI

TD

02/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date