## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000006322

FILED Mar 15, 2010 Secretary of State

Entity Name: FLORIDA BROWNFIELDS ASSOCIATION, INC.

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

1608 METROPOLITAN CIRCLE, SUITE B 1625 SUMMIT LAKE DRIVE

TALLAHASSEE, FL 32308 ÚS SUITE 300

TALLAHASSEE, FL 32317 US

Current Mailing Address: New Mailing Address:

PO BOX 4305 1625 SUMMIT LAKE DRIVE

TALLAHASSEE, FL 323154305 US SUITE 300

TALLAHASSEE, FL 32317 US

FEI Number: 50-0006337 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:

BUICE, BECKY 1625 SUMMIT LAKE DRIVE SUITE 300 TALLAHASSEE, FL 31317 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.

SIGNATURE:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

litie: VP

Name: ULLO, JOE

Address: 245 RIVERSIDE AVENUE, SUITE 150 City-St-Zip: JACKSONVILLE, FL 32202 US

Title: S/T

Name: LONG, ANNA

Address: 215 NORTH EOLA DRIVE City-St-Zip: ORLANDO, FL 32801

Title: F

 Name:
 LICHSTEIN, JASON

 Address:
 106 E. COLLEGE AVENUE

 City-St-Zip:
 TALLAHASSEE, FL 32301 US

Title: D

 Name:
 REGISTER, ROGER

 Address:
 POST OFFICE BOX 4305

 City-St-Zip:
 TALLAHASSEE, FL 32315

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: BECKY BUICE RA 03/15/2010