

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006322

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** FLORIDA BROWNFIELDS ASSOCIATION, INC.

**Current Principal Place of Business:**

1625 SUMMIT LAKE DRIVE  
SUITE 300  
TALLAHASSEE, FL 32317 US

**New Principal Place of Business:**

**Current Mailing Address:**

1625 SUMMIT LAKE DRIVE  
SUITE 300  
TALLAHASSEE, FL 32317 US

**New Mailing Address:**

**FEI Number:** 50-0006337

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUICE, BECKY  
1625 SUMMIT LAKE DRIVE  
SUITE 300  
TALLAHASSEE, FL 31317 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: PRES  
Name: ULLO, JOE  
Address: 245 RIVERSIDE AVENUE, SUITE 150  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP  
Name: LONG, ANNA  
Address: 215 NORTH EOLA DRIVE  
City-St-Zip: ORLANDO, FL 32801

Title: D  
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: REBECCA BUICE

MGR

01/07/2011

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

\_\_\_\_\_  
Date