

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02606

FILED
Feb 24, 2009
Secretary of State

Entity Name: FLORIDA STATE GUARDIANSHIP ASSOCIATION, INC.

Current Principal Place of Business:

4901 PETRA COURT
WINTER SPRINGS, FL 32708 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 677579
ORLANDO, FL 328677579 US

New Mailing Address:

FEI Number: 59-2486569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, KAREN
1742 HILLGATE COURT
TALLAHASSEE, FL 32308 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: P () Delete
Name: CAMPBELL, KAREN
Address: 2292 WEDNESDAY STREET, STE. 1
City-St-Zip: TALLAHASSEE, FL 32308

Title: DV () Delete
Name: GETTY, JETTA
Address: 5230 ORANGE AVE
City-St-Zip: PORT ORANGE, FL 32129

Title: DT () Delete
Name: GIRELLO, PAUL
Address: 1641 NW 110TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: DS () Delete
Name: WOOD, PAT
Address: 3505 SE 35TH COURT
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GETTY, JETTA
Address: 5230 ORANGE AVE
City-St-Zip: PORT ORANGE, FL 32129

Title: DV (X) Change () Addition
Name: EAKIN, LEE
Address: 5841 CORPORATE WAY, SUITE 200
City-St-Zip: WEST PALM BEACH, FL 33407

Title: DT (X) Change () Addition
Name: WEBSTER, DEL
Address: 9960 SE 161ST PLACE
City-St-Zip: SUMMERFIELD, FL 34491

Title: DS (X) Change () Addition
Name: HARRELSON, CATHY
Address: 4460 INDIANAPOLIS ST NE
City-St-Zip: ST. PETERSBURG, FL 33703

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: H. LEONARD BURKE

ED

02/24/2009

Electronic Signature of Signing Officer or Director

_____ Date