

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005427

FILED
May 03, 2005
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF STUDENTS OF GERMAN, INC.

Current Principal Place of Business:

EAST LAKE HIGH SCHOOL
1300 SILVER EAGLE DRIVE
TARPON SPRINGS, FL 34688

New Principal Place of Business:

Current Mailing Address:

PETER LUGINBUEHL
3100 TEAL TERRACE
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 20-1164331 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LUGINBUEHL, PETER
3100 TEAL TERRACE
SAFETY HARBOR, FL 34695 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: REG. () Delete
Name: LUGINBUEHL, PETER
Address: 3100 TEAL TERRACE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: P () Delete
Name: WRIGHT, AMY
Address: 1540 ONON DAGA DRIVE
City-St-Zip: GENEVA, FL 32732

Title: VP () Delete
Name: SCHOBER, JULIA
Address: 1418 BRIHAM LOOP
City-St-Zip: GENEVA, FL 32732

Title: SEC. () Delete
Name: MAY, SHANNON
Address: 1774 DORCHESTER ROAD
City-St-Zip: CLEARWATER, FL 33764

Title: SEC. () Delete
Name: VONHOLT, CHRISTINA
Address: 7741 STARFIRE WAY
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: PETER LUGINBUEHL

Electronic Signature of Signing Officer or Director

REG.

05/03/2005

_____ Date