

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011803

FILED
Apr 11, 2008
Secretary of State

Entity Name: FLORIDA ELECTRIC AUTO ASSOCIATION INC

Current Principal Place of Business:

8343 BLUE CYPRESS DR
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

8343 BLUE CYPRESS DR
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 20-4937678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGGONER, SHAWN M
8343 BLUE CYPRESS DR
LAKE WORTH, FL 33467 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: WAGGONER, SHAWN M
Address: 8343 BLUE CYPRESS DR
City-St-Zip: LAKE WORTH, FL 33467

Title: V () Delete
Name: CLUNN, STEVE
Address: 1918 S. 34TH ST.
City-St-Zip: FT. PIERCE, FL 34947

Title: S () Delete
Name: FUERSTENAU, BOB
Address: 800 SW 12TH AVENUE
City-St-Zip: BOCA RATON, FL 33486

Title: T () Delete
Name: GRAHAM, MATTHEW
Address: 7962 SE HELEN TERRACE
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: SIMMONS, LOWELL L
Address: 13801 SW 37 COURT
City-St-Zip: DAVIE, FL 33330

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

Title: T (X) Change () Addition
Name: GRAHAM, MATTHEW D
Address: 5195 PALMBROOKE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417

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: SHAWN M WAGGONER

P

04/11/2008

Electronic Signature of Signing Officer or Director

Date