

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002626

FILED
Apr 06, 2006
Secretary of State

Entity Name: PARENT'S ATTORNEYS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

203 N. FRANKLIN BLVD.
TALLAHASSEE, FL 32301

New Principal Place of Business:

101 N MADISON
QUINCY, FL 32351

Current Mailing Address:

P. O. BOX 10426
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DOVE, JOYCE S
203 N. FRANKLIN BLVD.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

DOVE, JOYCE S
101 N MADISON ST
QUINCY, FL 32351 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: _____ 04/06/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STRAUS, TIM
Address: P. O. BOX 151058
City-St-Zip: ALTAMONTE SPRINGS, FL 32715

Title: D () Delete
Name: KIRK, DAWN
Address: 217 AVE. A
City-St-Zip: FT. PIERCE, FL 349504415

Title: D () Delete
Name: DOVE, JOYCE S
Address: P. O. BOX 10426
City-St-Zip: TALLAHASSEE, FL 32302

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOYCE SIBSON DOVE D 04/06/2006
Electronic Signature of Signing Officer or Director Date