
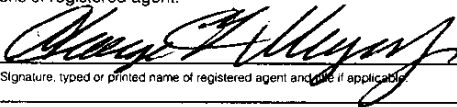
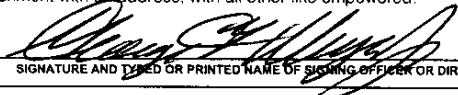


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008 8:00 am
Secretary of State

01-28-2008 90049 038 ****61.25

DOCUMENT # N05000009600					
1. Entity Name FLORIDA INSURANCE FRAUD EDUCATION COMMITTEE, INC.					
Principal Place of Business 103 ARBOUR ISLAND COURT PONTE VEDRA BEACH, FL 32082 US			Mailing Address PO BOX 2841 PONTE VEDRA BEACH, FL 32004-2841 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3427715	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MEYER, GEORGE F JR. 103 ARBOUR ISLAND COURT PONTE VEDRA BEACH, FL 32082			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 103 Harbour Island Court City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		George F. Meyer Jr.		1/23/08	
Signature, typed or printed name of registered agent and date if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Trust Fund Contribution.		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLEY, BRETT PO BOX 450999 SUNRISE, FL 33345	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
D KING, ERNIE D 7201 NW 11TH PLACE GAINESVILLE, FL 32605	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
D O'BRIEN, MARILYN E PO BOX 17800 JACKSONVILLE, FL 32245	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
T MEYER, GEORGE F JR PO BOX 2841 PONTE VEDRA BEACH, FL 320042841	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
S YOUNG, JANICE E 8001 BAYMEADOWS WAY JACKSONVILLE, FL 32231	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
D CUTCLIFFE, VICKI 200 E GAINES ST TALLAHASSEE, FL 323990324	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		George F. Meyer Jr. Treasurer		1/23/08 904-280-1502	
Signature and typed or printed name of signing officer or director		Date		Daytime Phone #	