2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010560

Entity Name: FLORIDA F AND Y BODY ASSOCIATION, INC

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2961 NE 37TH PLACE 25410 MADISON ST OCALA, FL 34479 ASTATULA, FL 34705

Current Mailing Address: New Mailing Address:

2961 NE 37TH PLACE P.O. BOX 526

OCALA, FL 34479 ASTATULA, FL 34705

FEI Number: 14-1854990 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOWERS, NATHAN D
2961 NE 37TH PLACE
CCALA, FL 34479 US

BOWERS, NATHAN D
25410 MADISON ST
ASTATULA, FL 34705 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: NATHAN BOWERS 04/26/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 BOWERS, NATHAN D
 Name:
 BOWERS, NATHAN D MR

 Address:
 2961 NE 37TH PLACE
 Address:
 25410 MADISON ST

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:
 ASTATULA, FL 34705

Title: VP () Delete Title: VP (X) Change () Addition Name: LEE, DEBORAH J Name: BOWERS-LEE, DEBORAH J MRS

 Address:
 2961 NE 37TH PLACE
 Address:
 25410 MADISON ST

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:
 ASTATULA, FL 34705

Title: D (X) Delete Title: () Change () Addition

 Name:
 BOWERS, DAVID
 Name:

 Address:
 2961 NE 37TH PLACE
 Address:

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:

 $\label{eq:time_def} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{(X) Delete} \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$

 Name:
 LEE, DEBORAH J
 Name:

 Address:
 2961 NE 37TH PLACE
 Address:

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 BOWERS, NATHAN D
 Name:

 Address:
 2961 NE 37TH PLACE
 Address:

 City-St-Zip:
 OCALA, FL 34479
 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: NATHAN BOWERS P 04/26/2006