

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05398

FILED
Jan 17, 2011
Secretary of State

Entity Name: FLORIDA SCHOLASTIC PRESS ASSOCIATION, INC.

Current Principal Place of Business:

UNIVERSITY OF FLORIDA
3014 WEIMER HALL
GAINESVILLE, FL 32611

New Principal Place of Business:

Current Mailing Address:

UF COLLEGE OF JOURNALISM & COMM.
P.O. BOX 118400
GAINESVILLE, FL 326118400

New Mailing Address:

FEI Number: 59-3106380

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:

WRIGHT, JOHN W DR.
COLLEGE OF JOURNALISM & COMMUNICATIONS
2096 WEIMER HALL
GAINESVILLE, FL 32611 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: XDIR
Name: GARCIA, WAYNE
Address: 3302 W WALLCRAFT AVE
City-St-Zip: TAMPA, FL 33611

Title: PP
Name: MAASSEN, JILL
Address: BOX 1351
City-St-Zip: ARCADIA, FL 34265

Title: PRES
Name: HUMPHREY, JOSEPH
Address: HILLSBOROUGH HS 5000 CENTRAL AVE
City-St-Zip: TAMPA, FL 33603

Title: DD
Name: THOR, STEVEN J
Address: 5100 DUPONT BLVD APT. 10 F
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: VP
Name: CANNADAY, JUDY
Address: PALM HRBR UNIV HS 1900 OMAHA ST.
City-St-Zip: PALM HARBOR, FL 34683

I hereby 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 all other like empowered.

SIGNATURE: WAYNE GARCIA

XDIR

01/17/2011

Electronic Signature of Signing Officer or Director

Date