

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05883

FILED
Jan 18, 2006
Secretary of State

Entity Name: THE FLORIDA INDEPENDENT AUTOMOBILE DEALERS ASSOCIATION, INC.

Current Principal Place of Business:

4162 EDGEWATER DRIVE
ORLANDO, FL 328042296 US

New Principal Place of Business:

3116 CAPITAL CIRCLE, NE
8
TALLAHASSEE, FL 32308 US

Current Mailing Address:

4162 EAGEWATER DR.
ORLANDO, FL 32804 US

New Mailing Address:

3116 CAPITAL CIRCLE NE
SUITE 8
TALLAHASSEE, FL 32308 US

FEI Number: 59-0801406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERS, LARRY
4162 EDGEWATER DRIVE
ORLANDO, FL 32804 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: MARBAIS, STEVE
Address: 1207 N. LAKEWOOD AVE
City-St-Zip: OCOEE, FL 34761

Title: V () Delete
Name: KEES-SHERIDAN, KELLIE
Address: 4200 WEST COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: MD () Delete
Name: PETERS, LARRY
Address: 4162 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: T () Delete
Name: GOEBEL, DAVID
Address: 1975 SW COLLEGE ROAD
City-St-Zip: OCALA, FL 34474

Title: C () Delete
Name: POTTS, RICK
Address: 4329 TAMiami TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33980

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KEES, KELLIE
Address: 4200 W. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: V (X) Change () Addition
Name: MATTON, PAUL
Address: 7751 PARK BOULEVARD
City-St-Zip: PINELLAS PARK, FL 33781

Title: MD (X) Change () Addition
Name: PETERS, LARRY
Address: 3116 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

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

Title: C (X) Change () Addition
Name: MARBAIS, STEVE
Address: 1207 N. LAKEWOOD AVENUE
City-St-Zip: OCOEE, FL 34761

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: LARRY PETERS

MD

01/18/2006

Electronic Signature of Signing Officer or Director

Date