

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007490

FILED
Feb 06, 2010
Secretary of State

Entity Name: FLORIDA SCHOOL COUNSELOR ASSOCIATION, INC.

Current Principal Place of Business:

4922 SW 26TH PL
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

4922 SW 26TH PL
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 20-5209244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SABELLA, RUSSELL A
4922 SW 26TH PL
CAPE CORAL, FL 33914 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
Name: JENKINS, CURTIS T
Address: 5944 SW 64 AVE
City-St-Zip: SOUTH MIAMI, FL 33143

Title: PP
Name: GERTEL, SUSAN
Address: 4621 CRANSTON PLACE
City-St-Zip: ORLANDO, FL 32812

Title: P-EL
Name: DOLINSKY, SHARON
Address: 361 SE 14TH AVE.
City-St-Zip: POMPANO, FL 33060

Title: VP
Name: SHOOK, JONI
Address: 123 FAIRWAY OAKS DRIVE
City-St-Zip: ORANGE PARK, FL 33569

Title: VP
Name: FEDENKO, LAURIE
Address: 2380 HIDDEN LAKE DRIVE
City-St-Zip: PALM HARBOR DRIVE, FL 34683

Title: VP
Name: SMITH, CHRIS
Address: 12555 GRANDEZZA CIRCLE
City-St-Zip: ESTERO, FL 33928

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: CURTIS T. JENKINS

P

02/06/2010

Electronic Signature of Signing Officer or Director

Date