2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011406

FILED Apr 21, 2009 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF SINKHOLE STABILIZATION SPECIALISTS, INC.

Current Principal Place of Business: New Principal Place of Business: 1306 BANANA RD. LAKELAND, FL 33810 **Current Mailing Address: New Mailing Address:** 7851 WOODLAND CENTER BLVD. TAMPA, FL 33614 FEI Number: 20-8396483 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: BOYLES, WILLIAM A. 301 E. PINE ST., STE. 1400 ORLANDO, FL 32801 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WOOLEVER, RAY Name: Name: LRE GROUND SERVICES INC/21228 POWELL RD Address: Address: City-St-Zip: BROOKSVILLE, FL 34604 City-St-Zip: Title: DV () Delete Title: () Change () Addition BROADRICK, RON Name: Name: Address: EARTH TECH, INC./ 2620 HUNT RD Address: City-St-Zip: LAND O LAKES, FL 34638 City-St-Zip: Title: DS () Delete Title: () Change () Addition BARTON, DAN Name: Name: RIMKUS CONS. GRP INC 101 S HOOVER BLVD#101 Address: Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip: Title: DT () Delete Title: () Change () Addition Name: MAGGARD, RON Name: Address: 7646 RICHLAND ST. Address: City-St-Zip: WESLEY CHAPEL, FL 33544 City-St-Zip: Title: () Delete Title: () Change () Addition COLLIER, LEWIS G Name: Name: CERTIFIED FOUNDATIONS INC/1306 BANANA RD Address: Address: City-St-Zip: LAKELAND, FL City-St-Zip: Title: () Delete Title: (X) Change () Addition SINN. GEORGE SMITH, TED Name: Name: Address: CENTRAL FL TESTING LAB/12625 40TH ST N Address: BCI/2000 E. EDGEWOOD DR., STE. 215 CLEARWATER, FL 33762 LAKELAND, FL 33803 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RAY WOOLEVER P 04/21/2009