2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012223

FILED Mar 28, 2009 Secretary of State

Entity Name: FLORIDA AMERICAN STRING TEACHERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 5907 TURNBULL DR 615 UPLAND RD ORLANDO, FL 32822 WEST PALM BEACH, FL 33401 **Current Mailing Address: New Mailing Address:** 615 UPLAND RD 615 UPLAND RD WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 FEI Number: 59-6196607 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JESSICA, TALBOTT J BEEBE, NANCY 5907 TURNBULL DR 615 UPLAND RD US WEST PALM BEACH, FL 33401 US ORLANDO, FL 32822 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: NANCY BEEBE 03/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BEEBE, NANCY Name: Name: 615 UPLAND RD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: Title: () Delete Title: () Change () Addition LESNIAK, MELISSA Name: Name: Address: 7716 SW 56 AVE. UNIT #1 Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: SEC () Delete Title: () Change () Addition GETTEL-BELL, KAREN Name: Name: 2339 CONWAY BLVD Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TALBOTT, JESSICA J Name: 5907 TURNBULL DR Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: Title: () Delete Title: TRE (X) Change () Addition ARSENAULT, VALERIE ARSENAULT, VALERIE Name: Name: 1315 CHOCKSACKA NENE 1315 CHOCKASACKA NENE Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301 Title: () Delete Title: () Change (X) Addition VANING-ROSEN, EDEN Name: Name: Address: Address: 2085 BURNICE DR. CLEARWATER, FL 33764 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: NANCY BEEBE P 03/28/2009