

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002767

FILED
May 13, 2009
Secretary of State

Entity Name: THE FLORIDA COALITION FOR PRESERVATION, INC.

Current Principal Place of Business:

235 NE SIXTH AVENUE, BUILDING F
DELRAY BEACH, FL 33483

New Principal Place of Business:

235 NE SIXTH AVENUE
BUILDING F
DELRAY BEACH, FL 33483

Current Mailing Address:

235 NE SIXTH AVENUE, BUILDING F
DELRAY BEACH, FL 33483

New Mailing Address:

235 NE SIXTH AVENUE
BUILDING F
DELRAY BEACH, FL 33483

FEI Number: 20-8675368 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STRAWN, JOEL T.
54 NE 4TH AVE.
DELRAY BEACH, FL 33483 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: T () Delete
Name: EVANS, THOMAS B. JR.
Address: 4475 N. OCEAN BLVD., APT. 20B
City-St-Zip: DELRAY BEACH, FL 33483

Title: T () Delete
Name: GANGER, ROBERT W.
Address: 1443 N. OCEAN BLVD.
City-St-Zip: GULF STREAM, FL 33483

Title: T () Delete
Name: LUETKEMEYER, JOHN A. JR.
Address: 2727 N. OCEAN BLVD.
City-St-Zip: GULF STREAM, FL 33483

Title: T () Delete
Name: HARDIMAN, JOSEPH R.
Address: 540 OLD SCHOOL RD.
City-St-Zip: GULF STREAM, FL 33483

Title: T (X) Delete
Name: DICKENSON, MELVILLE P. JR.
Address: 4475 N. OCEAN BLVD., APT. 47
City-St-Zip: DELRAY BEACH, FL 33483

Title: T (X) Delete
Name: WIBBELSMAN, NANCY B.
Address: 2613 N. OCEAN BLVD.
City-St-Zip: GULF STREAM, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: MARTIN, PETER
Address: 4475 N OCEAN BLVD #106
City-St-Zip: DELRAY BEACH, FL 33483

Title: PRES (X) Change () Addition
Name: GANGER, ROBERT W.
Address: 1443 N. OCEAN BLVD.
City-St-Zip: GULF STREAM, FL 33483

Title: TRES (X) Change () Addition
Name: SCHULTE, BERND
Address: 5 OSPREY CT
City-St-Zip: OCEAN RIDGE, FL 33435

Title: ASST (X) Change () Addition
Name: WHITTAKER, BARBARA
Address: 1120 N OCEAN
City-St-Zip: GULF STREAM, FL 33483

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

Title: () Change () Addition
Name:
Address:
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: ROBERT GANGER

PRES

05/13/2009

Electronic Signature of Signing Officer or Director

Date