2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 21, 2009
Secretary of State

DOCUMENT# N07000003658

Entity Name: FLORIDIANS AGAINST WORKPLACE VIOLENCE, INC.

Current Principal Place of Business:

227 S ADAMS ST
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

227 S ADAMS ST
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 20-8815157 **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:

MCALLISTER, RICHARD A
227 S ADAMS STREET
TALLAHASSEE, FL 32301 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: D ( ) Delete
Name: MCALLISTER, RICK
Address: 227 S ADAMS ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete
Name: MILLER, RANDY
Address: 227 S ADAMS ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Delete
Name: HOUSE, SALLY
Address: 227 S ADAMS ST
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MCALLISTER, RICHARD
Address: 227 S ADAMS ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change ( ) Addition
Name: MILLER, PARK R
Address: 227 S ADAMS ST
City-St-Zip: TALLAHASSEE, FL 32301

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: DEBRA A. CROW CFO 08/21/2009

Electronic Signature of Signing Officer or Director — Date