2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# N07000009480

Entity Name: FLORIDA ASSOCIATION OF CAMPUS SAFETY & SECURITY ADMINISTRATORS, INC. (FACSSA)

Current Principal Place of Business:

ATTN: RICK TUBBS
2700 N TAMIAMI TRAIL
SARASOTA, FL 34234

New Principal Place of Business:

ATTN: MELISSA DAVIS
3301 COLLEGE AVENUE
DAVIE, FL 33314

Current Mailing Address:

ATTN: RICK TUBBS
2700 N TAMIAMI TRAIL
SARASOTA, FL 34234

New Mailing Address:

ATTN: MELISSA DAVIS
3301 COLLEGE AVENUE
DAVIE, FL 33314

FEI Number: 11-3827909 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YOUNG, LORENE S ESQ
6570 GRIFFIN RD SUITE 102
DAVIE, FL 333144391 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: PD ( ) Delete
Name: TUBBS, RICK
Address: 2700 N TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34234

Title: SD ( ) Delete
Name: WATSON, JOHN
Address: 15800 NW 42 AVE
City-St-Zip: MIAMI, FL 33054

Title: TD ( ) Delete
Name: PORTER, PAUL
Address: 5840 26 STREET WEST
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: DAVIS, MELISSA
Address: 3301 COLLEGE AVENUE
City-St-Zip: DAVIE, FL 33314

Title: SD (X) Change ( ) Addition
Name: VAN BUREN, WILLIAM
Address: 3301 COLLEGE AVENUE
City-St-Zip: DAVIE, FL 33314

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: MELISSA DAVIS O 04/09/2009

Electronic Signature of Signing Officer or Director — Date