

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000010276

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA BUSINESS TECHNOLOGY EDUCATION ASSOCIATION, INC.

**Current Principal Place of Business:**

1812 TOM-A-TOE ROAD  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

**Current Mailing Address:**

1812 TOM-A-TOE ROAD  
BOYNTON BEACH, FL 33426

**New Mailing Address:**

**FEI Number:** 30-0519707

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LARSEN, SUSAN  
1812 TOM-A-TOE ROAD  
BOYNTON BEACH, FL 33426 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:** P  
**Name:** WORRELL, STACY  
**Address:** 15308 SW 91ST WAY  
**City-St-Zip:** LAKE BUTLER, FL 32054

**Title:** S  
**Name:** CRUMPLER, DAN  
**Address:** 3765 SUMMERWIND CIRCLE  
**City-St-Zip:** BRADENTON, FL 34209

**Title:** T  
**Name:** LARSEN, SUSAN  
**Address:** 1812 TOM-A-TOE ROAD  
**City-St-Zip:** BOYNTON BEACH, FL 33426

I hereby 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 all other like empowered.

**SIGNATURE:** SUSAN S. LARSEN

T

03/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date