2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08315

FILED Mar 01, 2012 Secretary of State

Entity Name: FLORIDA CONSUMER ACTION NETWORK FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3006 W KENNEDY BLVD

SUITE B

TAMPA, FL 33609 US

Current Mailing Address: New Mailing Address:

3006 W KENNEDY BLVD SUITE B TAMPA, FL 33609 US

FEI Number: 59-2475079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HENDRICKSON, DAN 319 E PARK AVE

TALLAHASSEE, FL 32301 US

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

Name: CURIEL, ALISA

Address: 275 JOHN KNOX RD APT M-101 City-St-Zip: TALLAHASSEE, FL 32303

Title: D

 Name:
 GASSER, ROSE MARIE

 Address:
 12425 6TH STREET EAST

 City-St-Zip:
 TREASURE ISLAND, FL 33706

Title:

 Name:
 EVANS, JANICE

 Address:
 1720 NW 81ST WAY

 City-St-Zip:
 PLANTATION, FL 33322

Title: PD

 Name:
 HENDRICKSON, DAN

 Address:
 704 W MADISON ST

 City-St-Zip:
 TALLAHASSEE, FL 32304

Title: SD

Name: FOSTER, WINNIE Address: 311 57TH AVE S

City-St-Zip: ST PETERSBURG, FL 33705

Title: ED

Name: NEWTON, BILL

Address: 3006 W KENNEDY BLVD STE B

City-St-Zip: TAMPA, FL 33609

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: BILL NEWTON ED 03/01/2012