2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006249

FILED Jan 13, 2012 Secretary of State

Entity Name: FLORIDA STATE FRATERNAL ALLIANCE INCORPORATED

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

405 E PALMETTO AVENUE LONGWOOD, FL 327504213 US

Current Mailing Address: New Mailing Address:

276 SILAS COURT 2302 SPRUCEWOOD LANE SPRING HILL, FL 346099083 US PLANT CITY, FL 33563 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

SMITH, EDDIE 405 E PALMETTO AVE LONGWOOD, FL 327504213 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:

Γitle: I

Name: SMITH, EDDIE Address: 405 E PALMETTO AVE

City-St-Zip: LONGWOOD, FL 327504213 US

Title: ST

Name: BOHM, JOANNE

Address: 2302 SPRUCEWOOD LANE City-St-Zip: PLANT CITY, FL 33563 US

Title: D

 Name:
 HARLEY, ROBERT

 Address:
 3490 SUMMERWOOD WAY

 City-St-Zip:
 LAKELAND, FL 358125019 US

Title:

Name: COMENSKY, BILL Address: PO BOX 1030

City-St-Zip: JUPITER, FL 334681030 US

Title: [

 Name:
 ZECMAN, REMI

 Address:
 8601 BRADLEY CIRCLE

 City-St-Zip:
 CLERMONT, FL 347118477 US

Title: [

Name: WALSH, SEAN
Address: 22038 SW SURF BLVD

City-St-Zip: DUNNELLON, FL 344314051 US

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: JOANNE BOHM ST 01/13/2012