

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18051

FILED  
May 02, 2007  
Secretary of State

**Entity Name:** THE FINANCIAL PLANNING ASSOCIATION OF NORTHEAST FLORIDA, INC.

**Current Principal Place of Business:**

P.O. BOX 551604  
JACKSONVILLE, FL 322551604 US

**New Principal Place of Business:**

C/O SUN TRUST BANK, N FL, 76 S LAURA ST  
JACKSONVILLE, FL 32202 US

**Current Mailing Address:**

P.O. BOX 551604  
JACKSONVILLE, FL 322551604 US

**New Mailing Address:**

**FEI Number:** 59-2750430 **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:**

SCHAEDEL, JOHN G  
1900 FOX GLOVE LANE  
ORANGE PARK, FL 320037460 US

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

DONDERO, JOHN  
4651 SALISBURY RD.  
STE. 275  
JACKSONVILLE, FL 32256 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: JOHN DONDERO

05/02/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DC (X) Delete  
Name: CRIBB, JAMES  
Address: 1536 KINGSLEY AVE, SUITE 124  
City-St-Zip: ORANGE PARK, FL 32073

Title: PD ( ) Delete  
Name: CLARK, ROBIN  
Address: HR CLARK,LLC-750 NATURES HAMMOCK RD W  
City-St-Zip: JACKSONVILLE, FL 322592881

Title: PE/D ( ) Delete  
Name: ELIAS, NASSIM  
Address: C/O SUN TRUST BANK, N FL, 76 S LAURA ST  
City-St-Zip: JACKSONVILLE, FL 32202

Title: TD ( ) Delete  
Name: BOARDMAN, KELLY  
Address: I E ACCOUNTING SERVICES,INC P O BOX 600216  
City-St-Zip: JACKSONVILLE, FL 32260

Title: SD ( ) Delete  
Name: SCHAEDEL, JOHN  
Address: 1900 FOX GLOVE LANE  
City-St-Zip: ORANGE PARK, FL 320037460

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: DONDERO, JOHN  
Address: 4651 SALISBURY RD  
City-St-Zip: JACKSONVILLE, FL 32256

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: JOHN DONDERO

SD

05/02/2007

Electronic Signature of Signing Officer or Director

Date