

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18456

FILED
Jun 03, 2004
Secretary of State**Entity Name:** FLORIDA PAWNBROKERS ASSOCIATION, INC.**Current Principal Place of Business:**227 N. JOHN YOUNG PARKWAY SUITE A
KISSIMMEE, FL 34741**New Principal Place of Business:**225 N. JOHN YOUNG PARKWAY SUITE B
KISSIMMEE, FL 34741**Current Mailing Address:**227 N. JOHN YOUNG PARKWAY SUITE A
KISSIMMEE, FL 34741**New Mailing Address:**225 N. JOHN YOUNG PARKWAY SUITE B
KISSIMMEE, FL 34741**FEI Number:** 59-2960834**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FAIVRE, ROGER
611 BRANDON BLVD.
BRANDON, FL 33511 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: CD () Delete
Name: DELHAGEN, BUTCH
Address: 3210 CLARK RD
City-St-Zip: SARASOTA, FL 34231

Title: TD () Delete
Name: LETSCH, DONNA
Address: 7634 SO. US HWY. #1
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: EVPD () Delete
Name: WIGELSWORTH, CLAY
Address: 5716 SE ABSHIER BLVD.
City-St-Zip: BELLEVIEW, FL 34420

Title: PD () Delete
Name: FAIVRE, ROGER
Address: 611 W BRANDON BLVD.
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SPD (X) Change () Addition
Name: PORTER, MICHAEL SECRETA
Address: 14 S.W. 1ST AVENUE #A
City-St-Zip: OCALA, FL 34474

Title: TD (X) Change () Addition
Name: SKIERSKI, SAM TREASUR
Address: 209 N. OHIO AVENUE
City-St-Zip: LIVE OAK, FL 32064

Title: EVPD (X) Change () Addition
Name: DICKY, MARI EX. VP
Address: 859 W. BLOOMINGDALE AVE.
City-St-Zip: BRANDON, FL 33511

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROGER P. FAIVRE

PD

06/03/2004

Electronic Signature of Signing Officer or Director

Date