

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 05, 2008 8:00 am
Secretary of State

02-05-2008 90010 046 ****61.25

DOCUMENT # N20620

1. Entity Name

**FLORIDA ASSOCIATION OF COORDINATED
TRANSPORTATION SYSTEMS, INCORPORATED**



Principal Place of Business

P O BOX 1721
TALLAHASSEE FL 32302

Mailing Address

P O BOX 1721
TALLAHASSEE FL 32302



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2828619

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WATERS, EDWARD B
2201 EISENHOWER STREET
TALLAHASSEE FL 32310**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and fee filer (separate)

(NOTE: Registered Agent signature not used when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to:
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME TD
STREET ADDRESS WATERS, EDWARD
CITY-ST-ZIP 2201 EISENHOWER ST
TALLAHASSEE FL 32310

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME SD
STREET ADDRESS KNIGHT, RENEE
CITY-ST-ZIP 604 WALKIUT ST
GREEN COVE SPRINGS FL 32043

TITLE ☒ Change ☐ Addition
NAME SD
STREET ADDRESS Hartzog, Sheryl
CITY-ST-ZIP 604 Walnut Street
Green Cove Springs, FL 32043

TITLE ☐ Delete
NAME PD
STREET ADDRESS BRYANT, GARY
CITY-ST-ZIP 10075 BAVARIA ROAD, S.E.
FORT MYERS FL 33913

TITLE ☒ Change ☐ Addition
NAME PD
STREET ADDRESS Griffin, Ed
CITY-ST-ZIP 14676 S.W. 39th Court Road
Ocala, FL 34473

TITLE ☐ Delete
NAME VD
STREET ADDRESS SLAYBAUGH, DIANNE
CITY-ST-ZIP DRAWER HS04 BOX 9005
BARTOW FL 33831

TITLE ☒ Change ☐ Addition
NAME VD
STREET ADDRESS Cart, Donna
CITY-ST-ZIP 1101 S.W. 20th Court
Ocala, FL 34474

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edward B Waters*

01/29/08

850-574-6266