

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21362

FILED
Apr 14, 2005
Secretary of State

Entity Name: FLORIDA IMPACT, INC.

Current Principal Place of Business:

345 S. MAGNOLIA DR.
SUITE E-11
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

345 S. MAGNOLIA DR.
SUITE E-11
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-2859151 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUSIE, DEBRA
345 S MAGNOLIA DR
SUITE E-11
TALL, FL 32301 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: D () Delete
Name: GUTIERREZ, LIZ
Address: 8259 CAUSEWAY BLVD.
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: COSPER, CINDY
Address: 520 OAKLAND AVE.
City-St-Zip: TALLAHASSEE, FL 32301

Title: T () Delete
Name: O'BRIEN, SHEILA
Address: 3210 E LAKESHORE DR
City-St-Zip: TALL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: COSPER, CINDY
Address: 520 OAKLAND AVE.
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change () Addition
Name: HINGST, EMORY
Address: 1507 PAYNE STREET
City-St-Zip: TALLAHASSEE, FL 32303

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: CINDY COSPER

T

04/14/2005

Electronic Signature of Signing Officer or Director

Date