

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21494

FILED
Apr 12, 2012
Secretary of State

Entity Name: FLORIDA STORYTELLING ASSOCIATION, INC.

Current Principal Place of Business:

14810 NW 121 TERRACE
ALACHUA, FL 33615 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 70
ALACHUA, FL 32616

New Mailing Address:

FEI Number: 59-2836345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFER, DEIGH
14810 NW 121 TERRACE
ALACHUA, FL 32615 US

Name and Address of New Registered Agent:

HOFFER, DEIGH MS.
14810 NW 121 TERRACE
ALACHUA, FL 32615 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: DEIGH ANN HOFFER

04/12/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BUTTERWORTH, MYLINDA
Address: 8396 MARYLAND ROAD
City-St-Zip: LAKE SHORE, MD 21122

Title: VP
Name: KASTLE, CHRIS
Address: 37205 HARBOUR VISTA CR
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: T
Name: NEASE, PAT
Address: 4435 PRATT AVE
City-St-Zip: PANAMA CITY, FL 32404

Title: S
Name: ALEXANDRE, ADELE
Address: 3305 ARUBA WAY, C-4
City-St-Zip: COCONUT CREEK, FL 33066

Title: D
Name: GREEN, TAMARA
Address: 15024 MEADOWLAKE STREET
City-St-Zip: ODESSA, FL 33556

Title: D
Name: SCROGGIE, ANN
Address: 2100 SW 79TH DRIVE
City-St-Zip: GAINESVILLE, FL 32607

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: DEIGH ANN HOFFER

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04/12/2012

Electronic Signature of Signing Officer or Director

Date