


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # N26661 1. Entity Name FILIPINO AMERICAN CULTURAL ASSOCIATION, INC.	
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Principal Place of Business 6 EMERALD DR. PORPOISE POINT KEY WEST, FL 33040-5636	Mailing Address 6 EMERALD DR. PORPOISE POINT KEY WEST, FL 33040-5636
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01302008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0364554	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TABAG, ERLINDA S. 6 EMERALD DR. PORPOISE POINT KEY WEST, FL 33040

**DO NOT WRITE
IN THIS SPACE**

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: Erlinda S. Tabag DATE: 04/03/08
Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

04/18/08-80042-006 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TABAG, ANDRES P. 6 EMERALD DRIVE KEY WEST, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUSAN DOMINGUEZ 13 JEWFISH AVENUE KEY LARGO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POPPLEIN, TERESITA 273 HIBISCUS ST BIG PINE KEY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD SKINNER, MICHAEL J 29858 SEA LN BIG PINE KEY, FL 33043
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Andres P. Tabag

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/08 305-296-9747
Date Daytime Phone