2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004
Secretary of State

DOCUMENT# N26665

Entity Name: FLORIDA ASSOCIATION OF AGENCIES SERVING THE BLIND, INC.

Current Principal Place of Business:

C/O IND. F/T BLIND
1286 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

C/O F.I.R.E.
1286 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 US

Current Mailing Address:

C/O IND. F/T BLIND
1286 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 US

New Mailing Address:

C/O F.I.R.E.
1286 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 US

FEI Number: 59-2905001 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOCH, HAROLD
1286 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

MAYROS, ROXANN
1286 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 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: ROXANN MAYROS 07/09/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KOCH, HAROLD
Address: 1286 CEDAR CENTER DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: TD ( ) Delete
Name: KELLY, ROBERT T
Address: 405 WHITE STREET
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VP ( ) Delete
Name: MAYROS, ROXANN
Address: 601 S.W. 8TH AVE.
City-St-Zip: MIAMI, FL 33130

Title: SD ( ) Delete
Name: NASENI, LEE
Address: 215 E. NEW HAMPSHIRE STREET
City-St-Zip: WINTER PARK, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MAYROS, ROXANN
Address: 601 S.W. 8TH AVE.
City-St-Zip: MIAMI, FL 33130

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

Title: VP (X) Change ( ) Addition
Name: MANN, DANIEL
Address: 6925 112TH CIRCLE NORTH, SUITE 103
City-St-Zip: LARGO, FL 34643

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: ROBERT KELLY TD 07/09/2004
Electronic Signature of Signing Officer or Director Date