

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 20, 2009
Secretary of State

DOCUMENT# N27403

Entity Name: FLORIDA REGIONAL CONVENTION, INC.**Current Principal Place of Business:**706 N INGRAHAM AVE
LAKELAND, FL 33801 US**New Principal Place of Business:****Current Mailing Address:**706 N INGRAHAM AVE
LAKELAND, FL 33801 US**New Mailing Address:****FEI Number:** 65-0069637**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**DE MORALES, DIANA
8511 MISTY RIVER COURT
TAMPA, FL 33637 US**Name and Address of New Registered Agent:**DE MORALES, DIANA
10306 VENITIA REAL AVENUE
APT #203
TAMPA, FL 33647 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: _____

09/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: DE MORALES, DIANA
Address: 8511 MISTY RIVER COURT
City-St-Zip: TAMPA, FL 33637

Title: PD () Delete
Name: SMITH, BARBARA
Address: 3233 TENOROC MINE ROAD
City-St-Zip: LAKELAND, FL 33805

Title: VPD () Delete
Name: LAWSON, BARBRA
Address: 5243 - 18TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: D () Delete
Name: SEAMAN, KIM
Address: 51 E JOSHUA COURT
City-St-Zip: HERNANDO, FL 34442

Title: D () Delete
Name: PITTMAN, MILLICENT
Address: 721 E. TENNESSEE STREET
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: DE MORALES, DIANA
Address: 10306 VENITIA REAL AVENUE
City-St-Zip: TAMPA, FL 33647

Title: PD (X) Change () Addition
Name: OVERTON, DAWN K
Address: 9658 E BAY MEADOWS DRIVE
City-St-Zip: INVERNESS, FL 34450

Title: VPD (X) Change () Addition
Name: SEAMAN, KIM
Address: 51 E JOSHUA COURT
City-St-Zip: HERNANDO, FL 34442

Title: D (X) Change () Addition
Name: PITTMAN, MILLICENT L
Address: 721 E. TENNESSEE STREET
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Change () Addition
Name: SMITH, SHARLENE H
Address: 9625 PINE ISLAND ROAD
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DIANA DE MORALES

TD

09/20/2009

Electronic Signature of Signing Officer or Director

Date