2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2011
Secretary of State

DOCUMENT# N32910

Entity Name: FLORIDA ASSOCIATION OF SERVICE PROVIDERS, INC.

Current Principal Place of Business:

1018 THOMASVILLE RD
STE 110
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

1018 THOMASVILLE RD
STE 110
TALLAHASSEE, FL 32303 US

New Mailing Address:

FEI Number: 59-2632012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARGARET LYNN DUGGAR & ASSOCIATES, INC.
1018 THOMASVILLE RD STE 110
TALLAHASSEE, FL 32303 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: T
Name: CLARK, JOHN
Address: P.O. BOX 17066
City-St-Zip: PENSACOLA, FL 325227066 US

Title: DS
Name: LUGO, ELIZABETH
Address: 1515 PALMETTO PARK ROAD
City-St-Zip: BOCA RATON, FL 33486 US

Title: 1VP
Name: CAMPBELL, ELLEN
Address: 1816 9TH STREET WEST
City-St-Zip: BRADENTON, FL 34205 US

Title: P
Name: DEIGL, KAREN
Address: 964 14TH ST.
City-St-Zip: VERO BEACH, FL 32960 US

Title: PP
Name: BARTON, TERESA
Address: 4250 LAKESIDE DRIVE SUITE 116
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: 2VP
Name: FERRANTE, STEPHEN
Address: 777 GLADES ROAD SO274
City-St-Zip: BOCA RATON, FL 33431 US

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: KAREN DEIGL P 03/10/2011

Electronic Signature of Signing Officer or Director — Date