

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90452 044 ****61.25

DOCUMENT # N40853

1. Entity Name

FLORIDA ASSOCIATION FOR STAFF DEVELOPMENT, INC.



Principal Place of Business

**PO BOX 361
BROOKSVILLE FL 34605
US**

Mailing Address

**PO BOX 361
BROOKSVILLE FL 34605
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2267095**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**A.G.C.; CO.
200 SOUTH ORANGE AVE.
SUITE 2300
ORLANDO FL 32801**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☒ Delete
NAME	CROTEAU, THERESA	
STREET ADDRESS	2757 WEST PENSACOLA ST	
CITY-ST-ZIP	TALLAHASSEE FL 32304	
TITLE	PE	☐ Delete
NAME	MEADOWS, NEAL	
STREET ADDRESS	753 WEST BLVD	
CITY-ST-ZIP	CHIPLEY FL 32428	
TITLE	S	☐ Delete
NAME	SMITH, TERRI	
STREET ADDRESS	2757 W PENSACOLA STREET	
CITY-ST-ZIP	TALLAHASSEE FL 32304	
TITLE	T	☐ Delete
NAME	VERNER, MARY	
STREET ADDRESS	PO BOX 361	
CITY-ST-ZIP	BROOKSVILLE FL 34605	
TITLE	D	☐ Delete
NAME	COOKE, DEBBIE	
STREET ADDRESS	3372 FOREST HILL BLVD B-101	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	
TITLE	D	☐ Delete
NAME	CLINE, BETSY	
STREET ADDRESS	1020 JANET DR	
CITY-ST-ZIP	LAKELAND FL 33805	

TITLE	President	☒ Change ☐ Addition
NAME	Neal Meadows	
STREET ADDRESS	753 West Boulevard	
CITY-ST-ZIP	Chipley, FL 32428-1611	
TITLE	P.Elect	☒ Change ☐ Addition
NAME	Jim Croteau	
STREET ADDRESS	2757 West Pensacola Street	
CITY-ST-ZIP	Tallahassee, FL 32304	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Mary Verner-Treasurer

Mary Verner

2/3/03

(352)-797-7070 X.469

CR2E037 (10/02)