

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41823

FILED
May 28, 2009
Secretary of State

Entity Name: FLORIDA COUNCIL OF THE FEDERATION OF FLY FISHERS, INC.

Current Principal Place of Business:

2416 PARSON LN.
SARASOTA, FL 34239 US

New Principal Place of Business:

Current Mailing Address:
2416 PARSON LN.
SARASOTA, FL 34239 US

New Mailing Address:

FEI Number: 63-1300285 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: **Name and Address of New Registered Agent:**

GREENAN, PETER T
2416 PARSON LN.
SARASOTA, FL 34239 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GREENAN, PETER T
Address: 2416 PARSON LN.
City-St-Zip: SARASOTA, FL 34239

Title: T () Delete
Name: HAENNICKE, GEORGE
Address: 50 NW 128TH AVE.
City-St-Zip: PLANTATION, FL 33325

Title: VP () Delete
Name: GUNN, WILLIAM
Address: 101 MARION ST.
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: S () Delete
Name: WILLIAMS, JOANNA
Address: 219 FOUTH AVE. E.
City-St-Zip: BRADENTON, FL 34208

Title: D () Delete
Name: WILLIAMS, ROGER
Address: 219 4TH AVE. E.
City-St-Zip: BRADENTON, FL 34208

Title: D () Delete
Name: HARTER, JAMES
Address: 3360 SW ST. LUCIE SHORES DR.
City-St-Zip: PALM CITY, FL 34909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GUNN, WILLIAM
Address: 101 MARION ST.
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

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

Title: VP (X) Change () Addition
Name: HARTER, JAMES
Address: 3360 SW ST. LUCIE SHORES DR.
City-St-Zip: PALM CITY, FL 343909

Title: S (X) Change () Addition
Name: BELL, GERALD
Address: 4141 SUGAR BEAR TR.
City-St-Zip: TALLAHASSEE, FL 32311

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

Title: D (X) Change () Addition
Name: SUMMERS, CAS
Address: 806 WEATHERLY CT.
City-St-Zip: LONGWOOD, FL 32750

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: PETER T. GREENAN

RA

05/28/2009

Electronic Signature of Signing Officer or Director

Date