2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42544

FILED Apr 19, 2008 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF VERBATIM REPORTERS, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 141 NW MADISON CIRCLE NORTH ST. PETE, FL 33702 US **Current Mailing Address: New Mailing Address:** 141 NW MADISON CIRCLE NORTH ST. PETERSBURG, FL 33702 FEI Number: 65-0294775 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUFFMAN, PEGGY HUFFMAN, PEGGY 4124 REDĆOAT DR 4124 REDĆOAT DR ZEPHYRHILLS, FL 33543 ZEPHYRHILLS, FL 33543 US 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: PEGGY HUFFMAN 04/19/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BOWMAN, CHARLENE F Name: Name: 141 NW MADISON CIRCLE NORTH Address: Address: City-St-Zip: ST. PETERSBURG, FL City-St-Zip: Title: () Delete Title: () Change () Addition JOHNSON, KIM Name: Name: Address: 7702 LAKE CYPRESS DR Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: Title: () Delete Title: () Change () Addition MILLS, RALPH Name: Name: 509 N MORGAN STREET Address: Address: City-St-Zip: TAMPA, FL 33672 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GOUGH, PATRICIA K Name: 5801 N. PLESS ROAD Address: Address: City-St-Zip: PLANT CITY, FL 33565 City-St-Zip: Title: () Delete Title: () Change () Addition COOK, MARY Name: Name: 675 AVENIDA DE MAYO Address: Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip:

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: CHARLENE BOWMAN TREA 04/19/2008