

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48383

FILED  
Jan 20, 2008  
Secretary of State

**Entity Name:** FLORIDA ASSOCIATION OF SPECIAL DISTRICTS, INC.

**Current Principal Place of Business:**

2713 BLAIRSTONE LANE  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

2713 BLAIRSTONE LANE  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

**FEI Number:** 65-0332541

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRAWFORD, FRED  
2713 BLAIRSTONE LANE  
TALLAHASSEE, FL 32301 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: P ( ) Delete  
Name: ANGLE, JAMES J  
Address: 250 W. LAKE RD.  
City-St-Zip: PALM HARBOR, FL 34684

Title: P-P ( ) Delete  
Name: BONDE, JOHN  
Address: 12794 W. FOREST HILL BLVD.  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: P-EL ( ) Delete  
Name: SAUNIER, CLETE  
Address: P.O. BOX 407  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP ( ) Delete  
Name: BARDIN, O'NEAL JR.  
Address: 357 HIATT DR.  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: SEC ( ) Delete  
Name: LINDSAY, DAVID  
Address: 601 EAST COUNTY LN.  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: T ( ) Delete  
Name: QUICKEL, TANYA  
Address: 357 HIATT DR.  
City-St-Zip: PALM BEACH GARDENS, FL 33418

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES ANGLE

P

01/20/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date