

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 11, 2009
Secretary of State**

DOCUMENT# N92000000120

Entity Name: THE FLORIDA FEDERATION OF THE THEOSOPHICAL SOCIETY IN AMERICA, INC.

Current Principal Place of Business:

5974 WILLOW BRIDGE LOOP
ELLENTON, FL 34222

New Principal Place of Business:

Current Mailing Address:

5974 WILLOW BRIDGE LOOP
ELLENTON, FL 34222

New Mailing Address:

FEI Number: 23-7015219 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNOW-CLEWELL, JUDITH
5974 WILLOW BRIDGE LOOP
ELLENTON, FL 34222 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: SNOW-CLEWELL, JUDITH
Address: 5974 WILLOW BRIDGE LOOP
City-St-Zip: ELLENTON, FL 34222

Title: T () Delete
Name: MOKHTAR, MOHAMED
Address: 12581 81ST AVE N
City-St-Zip: SEMINOLE, FL 33776

Title: S () Delete
Name: SHAVE, BARBARA
Address: 1536 40TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: V () Delete
Name: JORDAN, GINGER
Address: 722 WENTWORTH ST
City-St-Zip: SEBASTIAN, FL 32958

Title: 2V () Delete
Name: MCKAY, TEDDIE
Address: 906 HEMLOCK ST
City-St-Zip: BAREFOOT BAY, FL 32978

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: SHAVE, BARBARA
Address: 1755 30TH AVE
City-St-Zip: VERO BEACH, FL 32960

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: JUDITH SNOW-CLEWELL

PRES

01/11/2009

Electronic Signature of Signing Officer or Director

_____ Date