

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000386

FILED
Jan 03, 2008
Secretary of State

Entity Name: FLORIDA MOTORCOACH ASSOCIATION INC.

Current Principal Place of Business:

106 MAIN STREET
BROOKNEAL, VA 24528 US

New Principal Place of Business:

Current Mailing Address:

106 MAIN STREET
BROOKNEAL, VA 24528 US

New Mailing Address:

FEI Number: 65-0377182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARSWELL, MATTHEW
8651 COMMODITY CIRCLE
ORLANDO, FL 32819 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: GRASSANO, ROBERT
Address: 3016 W. 38TH STREET
City-St-Zip: ORLANDO, FL 32839

Title: V () Delete
Name: RIAL, BOB
Address: 105 FIG TREE RUN
City-St-Zip: LONGWOOD, FL 32750

Title: ST () Delete
Name: CARSWELL, MATTHEW
Address: 8651 COMMODITY CIRCLE
City-St-Zip: ORLANDO, FL 32819

Title: IPP () Delete
Name: SASFAI, ANDY
Address: 12301 40TH ST. N.
City-St-Zip: CLEARWATER, FL 33762

Title: D () Delete
Name: AMADOR, MICHAEL
Address: P.O. BOX 170008
City-St-Zip: MIAMI, FL 33017

Title: D () Delete
Name: LAND, RAY
Address: P.O. BOX 214
City-St-Zip: BRANFORD, FL 32008

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:

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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: MATTHEW CARSWELL

ST

01/03/2008

Electronic Signature of Signing Officer or Director

Date