

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000246

FILED
Apr 09, 2011
Secretary of State

Entity Name: FLORIDA SIDS ALLIANCE, INC.

Current Principal Place of Business:

4044 WEST LAKE MARY BLVD.
UNIT # 104-209
LAKE MARY, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

4044 WEST LAKE MARY BLVD.
UNIT # 104-209
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 52-1747597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMER, BUNNY D
2176 ALAQUA DRIVE
LONGWOOD, FL 32779 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: VD
Name: HAMER, BUNNY D
Address: 2176 ALAQUA DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: PD
Name: BAGLEY, ROY
Address: 14 CHARLONATE DRIVE
City-St-Zip: GRAY, ME 04039

Title: SD
Name: SCULLEY, LISA
Address: 1000 LEE STREET
City-St-Zip: STARKE, FL 32091

Title: TD
Name: LANHAM, JUDY
Address: 3737 SAINT JOHNS BLUFF ROAD #2311
City-St-Zip: JACKSONVILLE, FL 32224

Title: D
Name: MELCHER, CHARLENE
Address: 1574 AMARYLLIS CIRCLE
City-St-Zip: ORLANDO, FL 32825

Title: D
Name: SIMON, HELENE
Address: 481 TOPEKA RD SW
City-St-Zip: PALM BAY, FL 32908

I hereby 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 all other like empowered.

SIGNATURE: BUNNY D. HAMER

VD

04/09/2011

Electronic Signature of Signing Officer or Director

Date