

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 05, 2011
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF BENTHOLOGISTS, INC.

Current Principal Place of Business:

6821 S.W. ARCHER ROAD
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

6821 S.W. ARCHER ROAD
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3156064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, DAVID L
6821 S.W. ARCHER ROAD
GAINESVILLE, FL 32608 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: PD
Name: MORGAN, PEGGY
Address: 13051 N. TELECOM PARKWAY
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: SD
Name: LINE, LAURA
Address: 6821 SW ARCHER RD
City-St-Zip: GAINESVILLE, FL 32608

Title: TD
Name: PLUCHINO, MARIANNE
Address: 425 PIERCE AVENUE, UNIT 202
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: D
Name: EBY, GLORIA
Address: 177 BUSH LOOP
City-St-Zip: SANFORD, FL 32773

Title: D
Name: RASMUSSEN, ANDREW
Address: FLORIDA A&M UNIV., PERRYPAIGE BLDG, #113
City-St-Zip: TALLAHASSEE, FL 32307

Title: D
Name: DENSON, DANA
Address: 2191 S. SERVICE LANE
City-St-Zip: LAKE BUENA VISTA, FL 32830

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: DAVID L. EVANS

RA

01/05/2011

Electronic Signature of Signing Officer or Director

Date