

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000049

FILED
Jan 05, 2009
Secretary of State

Entity Name: FLORIDA BEER WHOLESALERS ASSOCIATION, INC.

Current Principal Place of Business:

215 S. MONROE ST
SUITE 340
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

215 S. MONROE ST
SUITE 340
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 23-7010038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUBIN, MITCHELL J
215 S. MONROE ST
SUITE 340
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: D () Delete
Name: RUBIN, MITCHELL J
Address: 215 S. MOROE ST STE.,#340
City-St-Zip: TALLAHASSEE, FL 32301

Title: PD () Delete
Name: TRANSOU, PAL G
Address: 545 RIVER BIRCH RD.
City-St-Zip: MIDWAY, FL 32343

Title: TSD () Delete
Name: VROMAN, MARK
Address: 4747 PROGRESS AVE
City-St-Zip: NAPLES, FL 34104

Title: VPD () Delete
Name: BURKHARDT, DAN
Address: 6125 NW 18TH DRIVE
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: TRANSOU, HAL G
Address: 545 RIVER BIRCH RD.
City-St-Zip: MIDWAY, FL 32343

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

Title: VPD (X) Change () Addition
Name: PETRINI, RON
Address: 2310 STARKEY RD.
City-St-Zip: LARGO, FL 33771

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: MITCHELL J. RUBIN

D

01/05/2009

Electronic Signature of Signing Officer or Director

Date