

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000414

FILED  
Apr 12, 2007  
Secretary of State

**Entity Name:** FLORIDA MOSQUITO CONTROL FOUNDATION, INC.

**Current Principal Place of Business:**

P.O. BOX 358630  
GAINESVILLE, FL 326358630

**New Principal Place of Business:**

405 NW 39TH AVENUE  
GAINESVILLE, FL 32609

**Current Mailing Address:**

P.O. BOX 358630  
GAINESVILLE, FL 326358630 US

**New Mailing Address:**

**FEI Number:** 65-0524018      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ETHERSON, KELLIE  
405 NW 39TH AVE  
GAINESVILLE, FL 32609 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: VAN ESSEN, FRANK  
Address: 600 N RD  
City-St-Zip: NAPLES, FL 341043464

Title: DV ( ) Delete  
Name: REYNOLDS, WILLIAM  
Address: 2800 S FINANCIAL ACT  
City-St-Zip: SANFORD, FL 327738118

Title: D ( ) Delete  
Name: CARLSON, DOUG  
Address: PO BOX 670  
City-St-Zip: VERO BEACH, FL 329610670

Title: DMST ( ) Delete  
Name: ETHERSON, KELLIE  
Address: 405 NW 39TH AVE.  
City-St-Zip: GAINESVILLE, FL 32609 US

Title: DP ( ) Delete  
Name: ED, FUSSELL  
Address: 5224 COLLEGE ROAD  
City-St-Zip: KEY WEST, FL 33040 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: O (X) Change ( ) Addition  
Name: VAN ESSEN, FRANK  
Address: 600 N RD  
City-St-Zip: NAPLES, FL 341043464 US

Title: O (X) Change ( ) Addition  
Name: REYNOLDS, WILLIAM  
Address: 550 AERO LANE  
City-St-Zip: SANFORD, FL 327738118 US

Title: O (X) Change ( ) Addition  
Name: MOORE, DENNIS  
Address: 2308 MARATHON RD  
City-St-Zip: ODESSA, FL 33556 US

Title: D (X) Change ( ) Addition  
Name: ETHERSON, KELLIE  
Address: 405 NW 39TH AVE.  
City-St-Zip: GAINESVILLE, FL 32609 US

Title: O (X) Change ( ) Addition  
Name: FUSSELL, ED  
Address: 5224 COLLEGE ROAD  
City-St-Zip: KEY WEST, FL 33040 US

I hereby certify that the information supplied with this filing does not qualify for the 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: KELLIE ETHERSON

D

04/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date