

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002636

FILED
Jan 21, 2007
Secretary of State

Entity Name: FLORIDA TECHNOLOGY EDUCATION ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 550734
FT. LAUDERDALE, FL 33355 US

New Principal Place of Business:

BOX 550734
FT. LAUDERDALE, FL 33355 US

Current Mailing Address:

PO BOX 550734
FT. LAUDERDALE, FL 33355 US

New Mailing Address:

FEI Number: 65-0527676 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MORROW, MELLISSA A
4115 NORTH MISSION ROAD
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

MORROW, MELLISSA A
4112 19TH STREET N.
ST. PETERSBURG, FL 33714 US

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: _____

01/21/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: CHAMBERS, LINDA
Address: 8011 BROWER DRIVE
City-St-Zip: BRADENTON, FL 34211

Title: SD () Delete
Name: NORMAN, RICHARD
Address: 1201 MISSISSIPPI AVENUE
City-St-Zip: FORT PIERCE, FL 34950

Title: TD () Delete
Name: CUMMINGS, TOM
Address: 1751 SW 110 TERRACE
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: HAAS, JOAN
Address: 4600 ANDERSON ROAD
City-St-Zip: ORLANDO, FL 32812

Title: SD (X) Change () Addition
Name: NORMAN, RICHARD
Address: 1000 DARWIN BOULEVARD
City-St-Zip: PORT ST. LUCIE, FL 34953

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

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: TOM CUMMINGS

TD

01/21/2007

Electronic Signature of Signing Officer or Director

Date