2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2007
Secretary of State

DOCUMENT# N94000002682

Entity Name: THE ATHLETIC TRAINERS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

5404 BRERETON AVENUE
ORLANDO, FL 32839 US

New Principal Place of Business:

Current Mailing Address:

5404 BRERETON AVENUE
ORLANDO, FL 32839 US

New Mailing Address:

FEI Number: 65-0612869 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LENNON, STEPHANIE A
5404 BRERETON AVENUE
ORLANDO, FL 32839 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:	DP	( ) Delete
Name:	LENNON, STEPHANIE A	
Address:	5404 BRERETON AVENUE	
City-St-Zip:	ORLANDO, FL 32839	
Title:	DS	( ) Delete
Name:	HAMMONS, BOB	
Address:	1126 FOX MILL DRIVE	
City-St-Zip:	TALLAHASSEE, FL 32317	
Title:	DV	( ) Delete
Name:	STARR, LARRY M	
Address:	3516 MAHOGANY WAY	
City-St-Zip:	CORAL SPRINGS, FL 33065	
Title:	DT	( ) Delete
Name:	HAMMONS, GLENDA	
Address:	1126 FOX MILL DRIVE	
City-St-Zip:	TALLAHASSEE, FL 32317	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DT	(X) Change ( ) Addition
Name:	BIAGGI, WILLIAM	
Address:	9815 BRODBECK BLVD	
City-St-Zip:	ORLANDO, FL 32832	

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: STEPHANIE A. LENNON PRES 01/24/2007

Electronic Signature of Signing Officer or Director — Date