

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000036

FILED
Mar 17, 2009
Secretary of State

Entity Name: FLORIDA ADVISORY COUNCIL, INC.

Current Principal Place of Business:

2525 PONCE DE LEON BLVD, STE. 400
CORAL GABLES, FL 33134 US

New Principal Place of Business:

2525 PONCE DE LEON BOULEVARD
SUITE 400
CORAL GABLES, FL 33134 US

Current Mailing Address:

2525 PONCE DE LEON BLVD, STE. 400
CORAL GABLES, FL 33134 US

New Mailing Address:

2525 PONCE DE LEON BOULEVARD
SUITE 400
CORAL GABLES, FL 33134 US

FEI Number: 65-0542858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRAINA, SAM
2525 PONCE DE LEON BLVD, STE. 400
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ST. JOHN, GREGORY
700 SOUTH FEDERAL HIGHWAY
SUITE 200
BOCA RATON, FL 33432 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: GREGORY ST. JOHN

03/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TC () Delete
Name: ADORNO, HENRY N
Address: 2525 PONCE DE LEON BLVD, STE. 400
City-St-Zip: CORAL GABLES, FL 33134 US

Title: TS () Delete
Name: YOSS, GEORGE T
Address: 2525 PONCE DE LEON BLVD, STE. 400
City-St-Zip: CORAL GABLES, FL 33134 US

Title: TT () Delete
Name: TRAINA, SAM
Address: 2525 PONCE DE LEON BLVD, STE. 400
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TC (X) Change () Addition
Name: ADORNO, HENRY N
Address: 2525 PONCE DE LEON BLVD., STE. 400
City-St-Zip: CORAL GABLES, FL 33134 US

Title: TS (X) Change () Addition
Name: YOSS, GEORGE T
Address: 2525 PONCE DE LEON BLVD., STE. 400
City-St-Zip: CORAL GABLES, FL 33134 US

Title: TT (X) Change () Addition
Name: KULPA, BOB
Address: 2525 PONCE DE LEON BLVD., STE. 400
City-St-Zip: CORAL GABLES, FL 33134 US

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: GEORGE T. YOSS

S

03/17/2009

Electronic Signature of Signing Officer or Director

Date