

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001071

FILED
Jan 05, 2009
Secretary of State

Entity Name: FLORIDIANS FOR A SUSTAINABLE POPULATION, INC.

Current Principal Place of Business:

PO BOX 2641
CROSS CITY, FL 32628

New Principal Place of Business:

132 SE 276 STREET
CROSS CITY, FL 32628

Current Mailing Address:

PO BOX 2641
CROSS CITY, FL 32628

New Mailing Address:

P.O. BOX 2641
CROSS CITY, FL 32628

FEI Number: 59-3275788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TARNOW, JOYCE
132 SE 276 ST
CROSS CITY, FL 32628 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: PD () Delete
Name: TARNOW, JOYCE
Address: 132 SE 276 ST
City-St-Zip: CROSS CITY, FL 32628

Title: DVP () Delete
Name: WADE MATTHEWS,
Address: 5152 ADMIRAL PL
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: RUTH GRAY,
Address: 33325 E LAKE JOANNA DR
City-St-Zip: EUSTIS, FL 32736

Title: SD () Delete
Name: FUSARO, BEN
Address: 379 ROB ROY TRAIL
City-St-Zip: TALLAHASSEE, FL 32312

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

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: JOYCE TARNOW

PRES

01/05/2009

Electronic Signature of Signing Officer or Director

Date