

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002901

FILED
Jan 11, 2007
Secretary of State

Entity Name: USATF/FLORIDA ASSOCIATION, INC.

Current Principal Place of Business:

104 E. 11TH AVENUE
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

104 E. 11TH AVENUE
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 59-2837798 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BETZ, PAMELA L
104 11TH AVENUE
WINDERMERE, FL 34786 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: LARSEN, GEORGE E ROD
Address: 104 E. 11TH AVENUE
City-St-Zip: WINDERMERE, FL 34786

Title: SD () Delete
Name: SMOLKA, ALEX
Address: 576 SANDPIPER WAY
City-St-Zip: BOCA RATON, FL 33431

Title: TD () Delete
Name: BETZ, PAMELA
Address: 104 E. 11TH AVENUE
City-St-Zip: WINDERMERE, FL 34786

Title: VPD () Delete
Name: MEAD-TRICARD, LOUISE
Address: 8496 RIDGEWOOD AVE #3206
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: ALVAREZ, KATHY
Address: 10901 SW 24 STREET
City-St-Zip: MIAMI, FL 33165

Title: TD (X) Change () Addition
Name: BETZ, PAMELA L
Address: 104 E. 11TH AVENUE
City-St-Zip: WINDERMERE, FL 34786

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

Title: VPD () Change (X) Addition
Name: JOHN, TENBROECK
Address: 2336 URBAN ROAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: VPD () Change (X) Addition
Name: ALBERT, BOOKER
Address: 2040 NW 195 STREET
City-St-Zip: OPA LOCKA, FL 33056

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: GEORGE E. ROD LARSEN

PD

01/11/2007

Electronic Signature of Signing Officer or Director

Date