2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2009
Secretary of State

DOCUMENT# N95000003441

Entity Name: NORTHEAST FLORIDA FIRE PREVENTION ASSOCIATION, INC.

Current Principal Place of Business:

1312 NORTH DAYTONA AVE.
FLAGLER BEACH, FL 32136

New Principal Place of Business:

Current Mailing Address:

1312 NORTH DAYTONA AVE.
FLAGLER BEACH, FL 32136

New Mailing Address:

FEI Number: 59-3419233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARRETT, MICHAEL
1312 NORTH DAYTONA AVE.
FLAGLER BEACH, FL 32136 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: RAYNO, JOHN
Address: 1312 NORTH DAYTONA AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: VPD ( ) Delete
Name: SMITH, MARK
Address: 1312 NORTH DAYTONA AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: TD ( ) Delete
Name: GARRETT, MIKE
Address: 1312 NORTH DAYTONA AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: SD ( ) Delete
Name: ROBERTS, ZK
Address: 1312 NORTH DAYTONA AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: PIOD ( ) Delete
Name: MOLINARO, DONNA
Address: 1312 NORTH DAYTONA AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

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:

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: MIKE GARRETT TD 01/26/2009
Electronic Signature of Signing Officer or Director — Date