

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002334

FILED  
Jan 05, 2008  
Secretary of State

Entity Name: FBACC, INC.

## Current Principal Place of Business:

17129 U.S. HIGHWAY 19 NORTH  
CLEARWATER, FL 34624

## New Principal Place of Business:

## Current Mailing Address:

FBACC, INC  
PO BOX 5857  
CLEARWATER, FL 33758

## New Mailing Address:

FEI Number: 59-3385395

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WATTAM, JAMES M  
2210 MINNEOLA ROAD  
CLEARWATER, FL 33764 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: D ( ) Delete  
Name: WATTAM, JAMES  
Address: 2210 MINNEOLA ROAD  
City-St-Zip: CLEARWATER, FL 33764

Title: AD ( ) Delete  
Name: REED, ROGER  
Address: 6920 150TH AVENUE NORTH  
City-St-Zip: CLEARWATER, FL 33764

Title: T ( ) Delete  
Name: LAWRENCE, JAMES  
Address: 1631 AMARYLLIS COURT  
City-St-Zip: TRINITY, FL 34655

Title: S ( ) Delete  
Name: HENDERSON, EILENE  
Address: 1114 MARINE STREET  
City-St-Zip: CLEARWATER, FL 33755

## 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: JAMES M WATTAM

D

01/05/2008

Electronic Signature of Signing Officer or Director

Date