

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002406

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY RESERVE OFFICERS TRAINING CORPS ASSOCIATION (FAMU ROTC ASSOCIATION), INC.

**Current Principal Place of Business:**

1500 WAHNISH WY  
TALLAHASSEE, FL 32307

**New Principal Place of Business:**

**Current Mailing Address:**

1500 WAHNISH WY  
TALLAHASSEE, FL 32307

**New Mailing Address:**

**FEI Number:** 59-3383180

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DURHAM, MARCELLAS  
2402 TRESCOTT ST.  
TALLAHASSEE, FL 32312 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: JOE, RONALD M  
Address: 5105 RED FOX RUN  
City-St-Zip: TALLAHASSEE, FL 32303

Title: VD ( ) Delete  
Name: WILLIAMS, JEFFREY  
Address: 3104 DOWLING DR.  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD ( ) Delete  
Name: BLOUT, EDGAR E  
Address: 309 GAWAIN  
City-St-Zip: TALLAHASSEE, FL 32301

Title: SD ( ) Delete  
Name: BARRON, RONALD  
Address: 5507 TOURAINE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

**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: EDGAR E BLOUT

TD

04/13/2009

Electronic Signature of Signing Officer or Director

Date