
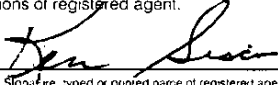


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2008 8:00 am**  
**Secretary of State**

01-16-2008 90018 028 \*\*\*\*61.25

<b>DOCUMENT # N97000001297</b> 1. Entity Name FLORIDA COUNCIL PDCA, INC.					
Principal Place of Business 1865 INDUSTRIAL PARK RD MULBERRY, FL 33860			Mailing Address 1865 INDUSTRIAL PARK RD MULBERRY, FL 33860		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-3452098	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent  TURNER, SANDRA G 1865 INDUSTRIAL PARK RD MULBERRY, FL 33860			7. Name and Address of New Registered Agent Name <b>Ken Sisco</b> Street Address (P.O. Box Number is Not Acceptable) <b>5245 Bowline Bend</b> City <b>New Port Richey</b> FL Zip Code <b>34652</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  DATE <b>Jan 12, 2008</b> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST TURNER, SANDRA G 1865 INDUSTRIAL PARK RD MULBERRY, FL 33860	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TIMM, LARRY 8285 101 ST COURT VERO BEACH, FL 32867	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TURNER, JAMES R 1865 INDUSTRIAL PARK RD MULBERRY, FL 33860	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SISCO, KEN 5245 BOWLINE BEND NEW PORT RICHEY, FL 34652	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LESLIE, ROBERT 1780 MAIN STREET SUITE A DUNEDIN, FL 34698	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President James R Turner 1865 Industrial Park Road Mulberry, FL 33860	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SISCO, KEN 5245 BOWLINE BEND NEW PORT RICHEY, FL 34652	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LESLIE, ROBERT 1780 MAIN STREET SUITE A DUNEDIN, FL 34698	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LESLIE, ROBERT 1780 MAIN STREET SUITE A DUNEDIN, FL 34698	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  DATE <b>Jan 12, 2008</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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01072008 Chg-NP CR2E037 (12/06)