

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001519

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: FLORIDA FEDERATION OF AVICULTURE, INC.

## Current Principal Place of Business:

1314 STATE ROAD 60 WEST  
PLANT CITY, FL 33567 US

## New Principal Place of Business:

6615 NEW TAMPA HWY  
LAKELAND, FL 33815 US

## Current Mailing Address:

P. O. BOX 6202  
BRANDON, FL 335086003

## New Mailing Address:

P. O. BOX 178  
KATHLEEN, FL 33849 01

FEI Number: 59-3449335

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTIN, PHYLLIS  
1314 S R 60 WEST  
PLANT CITY, FL 33567 US

## Name and Address of New Registered Agent:

PATTISON, JEAN L  
6615 NEW TAMPA HWY  
LAKELAND, FL 33815 US

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: JEAN PATTISON

04/27/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DT ( ) Delete  
Name: MEADE, JOHN  
Address: 10207 CONE GROVE ROAD  
City-St-Zip: RIVERVIEW, FL 33569

Title: PD ( ) Delete  
Name: PEARSON, RICHARD  
Address: 520 PEARSON'S PATH  
City-St-Zip: AUBURNDALE, FL 33823

Title: RASD ( ) Delete  
Name: MARTIN, PHYLLIS K  
Address: 1314 S.R. 60 WEST  
City-St-Zip: PLANT CITY, FL 33567

Title: D ( ) Delete  
Name: MCCORMIC, DAN  
Address: P.O. BOX 1000  
City-St-Zip: WILDWOOD, FL 34785

Title: VPD ( ) Delete  
Name: RICHARDSON, BILL  
Address: 54348 LAWHON ROAD WEST  
City-St-Zip: CALLAHAN, FL 32011

Title: D ( ) Delete  
Name: SMITH, FRED  
Address: 14710 BRAHAMA ROAD  
City-St-Zip: POLK CITY, FL 33868

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DOCHSTADER, MARTY  
Address: 3041 KEUKA LOOP  
City-St-Zip: LAKELAND, FL 33810

Title: VPD (X) Change ( ) Addition  
Name: WELCH, LISA  
Address: P.O. BOX 701  
City-St-Zip: THONOTASSA, FL 33592

Title: TD (X) Change ( ) Addition  
Name: SCHOTTENLOHER, JAN  
Address: P.O. BOX 11173  
City-St-Zip: SPRING HILL, FL 34610

Title: SD (X) Change ( ) Addition  
Name: HECTOR, EILEEN  
Address: 15720 TIMBERWOOD DR.  
City-St-Zip: TAMPA, FL 33625

Title: D (X) Change ( ) Addition  
Name: TUOMI, MONA  
Address: 17016 BOSLEY DR.  
City-St-Zip: SPRING HILL, FL 34610

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: JEAN PATTISON

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date