

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003463

FILED
Feb 01, 2008
Secretary of State

Entity Name: FLORIDA DIETETIC ASSOCIATION, INC.

Current Principal Place of Business:

1839 B BUFORD COURT
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

PO BOX 12608
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3521059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STAPELL, CHRISTINE
1839 B BUFORD COURT
TALLAHASSEE, FL 32308 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: GLADDING, MOLLY
Address: 19 W PALM AVE
City-St-Zip: LAKE WORTH, FL 33467

Title: PD () Delete
Name: BESELER, LUCILLE
Address: 5901 COLONIAL DR. #108
City-St-Zip: MARGATE, FL 33063

Title: S () Delete
Name: CHAMBERS, RACHEL
Address: 4911 AVON LANE
City-St-Zip: SARASOTA, FL 34238

Title: D () Delete
Name: O'NEILL, PEGGY
Address: 421 NE 1ST STREET, #119
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: TD () Delete
Name: ADAMS, HOLLY
Address: 284 EDINBURGH LANE
City-St-Zip: ORANGE PARK, FL 32073

Title: ED () Delete
Name: STAPELL, CHRISTINE
Address: 1839 B BUFORD COURT
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BESELER, LUCILLE
Address: 5901 COLONIAL DR. #108
City-St-Zip: MARGATE, FL 33063

Title: PD (X) Change () Addition
Name: PAZDER, NADINE
Address: 12249 137TH STREET
City-St-Zip: LARGO, FL 33774

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: CHRISTINE STAPELL

ED

02/01/2008

Electronic Signature of Signing Officer or Director

Date