

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006463

FILED
Jan 19, 2007
Secretary of State

Entity Name: REUSABLE RESOURCES ASSOCIATION, INC.

Current Principal Place of Business:

103 BUDRIS RD.
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 511001
MELBOURNE BEACH, FL 32951

New Mailing Address:

FEI Number: 59-3552849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DREW, WALTER F
103 BUDRIS RD.
MELBOURNE BEACH, FL 32951 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: DREW, WALTER F
Address: 103 BUDRIS RD.
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D () Delete
Name: DREW, KATHERINE
Address: 103 BUDRIS RD.
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: P () Delete
Name: BLANFORD, SUSAN
Address: 1305 HAVENHURST
City-St-Zip: MANCHESTER, MO 63011

Title: T () Delete
Name: CARTY, LINDA
Address: 202 ROYAL LANE
City-St-Zip: FAIRHOPE, AL 36532

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 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: WALTER F. DREW

D

01/19/2007

Electronic Signature of Signing Officer or Director

Date