

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000047800

FILED
Jan 07, 2009
Secretary of State

Entity Name: THE FLORIDA ADVANTAGE CORPORATION

Current Principal Place of Business:

1040 E. PARK AVENUE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

1040 E. PARK AVENUE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3321617 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WADSWORTH, JAMES B JR.
1040 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GAUPIN, WILLIAM T
Address: 224 HARBOUR POINTE DR
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: TD () Delete
Name: WADSWORTH, JAMES B JR.
Address: 1426 CONSTITUTION PLACE E.
City-St-Zip: TALLAHASSEE, FL 32308

Title: VPD (X) Delete
Name: LANDRUM, ROBERT G. JR.
Address: 1917 WILLIAM RUN DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: S (X) Delete
Name: PIOTROWSKI, JANIS W.
Address: 1929 COLLINS LANDING RD.
City-St-Zip: TALLAHASSEE, FL 32310

Title: D (X) Delete
Name: CONIGLIO, MICHAEL J.
Address: 92 ROYSTER DR
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D (X) Delete
Name: LINDSEY, W. FRED
Address: 901 LIVE OAK PLANTATION RD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: WADSWORTH, JAMES B JR
Address: 1426 CONSTITUTION PLACE E.
City-St-Zip: TALLAHASSEE, FL 32308

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES B WADSWORTH JR

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01/07/2009

Electronic Signature of Signing Officer or Director

Date