

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717899

Entity Name: FLORIDA ATTRACTIONS ASSOCIATION, INC.**Current Principal Place of Business:**1114 N GADSDEN ST
TALLAHASSEE, FL 32303**Current Mailing Address:**1114 N GADSDEN ST
TALLAHASSEE, FL 32303 US**FEI Number:** 59-1724091**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LUPFER, WILLIAM G
1114 N GADSDEN ST
TALLAHASSEE, FL 32303 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	LUPFER, WILLIAM G
Address	1114 N GADSDEN ST.
City-State-Zip:	TALLAHASSEE FL 32303

Title	D
Name	LONG, KIM
Address	1400 BROADWAY BLVD
City-State-Zip:	POLK CITY FL 33868

Title	D, CHAIRMAN
Name	CAIN, RICK
Address	81 LIGHTHOUSE AVENUE
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	DIRECTOR, TREASURER
Name	ROSE, SCOTT
Address	701 CHANNELSIDE DRIVE
City-State-Zip:	TAMPA FL 33602

Title	D
Name	ALTMAN, MARY
Address	ONE WORLD GOLF PLACE
City-State-Zip:	SAINT AUGUSTINE FL 32092

Title	DIRECTOR
Name	JOHNSON, MATTHEW
Address	2000 CRANFORD AVE
City-State-Zip:	FORT MYERS FL 33916

Title	SECRETARY, DIRECTOR
Name	ALLEN, KURT
Address	9600 OCEANSHORE BOULEVARD
City-State-Zip:	ST. AUGUSTINE FL 32080-8613

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM G LUPFER**PRESIDENT****01/29/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date