2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004510

Entity Name: FLORIDA BAR B QUE ASSOCIATION INC.

FILED
Mar 24, 2015
Secretary of State
CC5369120437

Date

Date

Current Principal Place of Business:

415 CARRIAGE WAY COURT OVIEDO. FL 32765

Current Mailing Address:

415 CARRIAGE WAY CT OVIEDO, FL 32765 US

FEI Number: 59-3663701 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IVERSEN, ANGELA D 415 CARRIAGE WAY COURT OVIEDO, FL 32765 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: ANGELA D IVERSEN 03/24/2015

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title VP

Name HARTWIG, EDWARD R Name BRUMM, STEVEN H

Address 241 ELLIS RD #12 Address BOX 309

City-State-Zip: MIRAMAR BEACH FL 32550 City-State-Zip: PANAMA CITY FL 32402

Title TREASURER Title SECRETARY

NameIVERSEN, ANGELA DNameWASHAM, CONSTANCE LAddress415 CARRIAGE WAY COURTAddress325 PRESTWICK COURT

City-State-Zip: OVIEDO FL 32765 City-State-Zip: OVIEDO FL 32765

Title DIRECTOR Title DIRECTOR

Name YOUNGBLOOD, ROBERT M Name FRAZEE, LAURA L

Address 2846 DAVELL ROAD Address 22210 SW NEPTUNE BLVD

City-State-Zip: JACKSONVILLE FL 32254 City-State-Zip: DUNNELLON FL 34431

Title DIRECTOR

Name ELSER, JAMES

Address 922 S HERON CIR

City-State-Zip: WINTER HAVEN FL 33884

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: ANGELA D IVERSEN TREASURER 03/24/2015

Electronic Signature of Signing Officer/Director Detail