2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002723

Entity Name: FLORIDA HUMANIST ASSOCIATION, INC.

Current Principal Place of Business:

580 EASTON FOREST CIR SE
PALM BAY, FL 32909

Current Mailing Address:

580 EASTON FOREST CIR SE
PALM BAY, FL 32909 US

FEI Number: 52-1570992

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOFFMAN, CHRISTOPHER
580 EASTON FOREST CIR SE
PALM BAY, FL 32909 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: CHRISTOPHER HOFFMAN   01/16/2020

_____   _____
Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	P		Title	VP
Name	WILLIAMSON, JOCELYN		Name	HELGAGER, DAVID
Address	580 EASTON FOREST CIR SE		Address	580 EASTON FOREST CIR SE
City-State-Zip:	PALM BAY FL 32909		City-State-Zip:	PALM BAY FL 32909
Title	T		Title	S
Name	HOFFMAN, CHRISTOPHER		Name	WILLIAMSON, DAVID
Address	580 EASTON FOREST CIR SE		Address	580 EASTON FOREST CIR SE
City-State-Zip:	PALM BAY FL 32909		City-State-Zip:	PALM BAY FL 32909
Title	AT LARGE		Title	AT LARGE
Name	SAUL, BJ		Name	DYE, CHERIE
Address	580 EASTON FOREST CIR SE		Address	580 EASTON FOREST CIR SE
City-State-Zip:	PALM BAY FL 32909		City-State-Zip:	PALM BAY FL 32909
Title	AT LARGE			
Name	BECHER, KEITH			
Address	580 EASTON FOREST CIR SE			
City-State-Zip:	PALM BAY FL 32909			

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: CHRISTOPHER W HOFFMAN   TREASURER   01/16/2020

_____   _____
Electronic Signature of Signing Officer/Director Detail   Date