2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740321

1. Entity Name

FLORIDA CPA POLITICAL ACTION COMMITTEE, INC.

Principal Place of Business Mailing Address 325 WEST COLLEGE AVENUE 325 WEST COLLEGE AVENUE P.O. BOX 5437 P.O. BOX 5437 TALLAHASSEE FL 32301 TALLAHASSEE FL 32314-5437 US

FILED Mar 31, 2000 8:00 am Secretary of State

03-31-2000 90040 033 ****61.25

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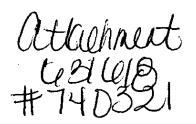
2. Principal Place of Business		3. Mailing Address			\$ \$201% 100% 010% 04120 14110 1100 1100 5101% 0101% 0101% 0101% 0101% 1101%			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4, FEI Numi	59-1807799		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificat	e of Status Desired	□ \$8.75 Fee Req	Additional	
6. Name and Address of Current Registered Agent				7. Name an	d Address of New Regi	istered Agent		
			Name					
	LLOYD A. COLLEGE AVENUE SEE FL 32301		Street Address (P.O. Box Number is Not Acceptable)					
			City			FL Zip	Code	
8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) PATE PATE 9. Election Campaign Financing Trust Fund Contribution. Added to Fees Department of State								
<u></u> _		<u> </u>				AND DIDECTOR	2 11 10	
10.	OFFICERS AND DIR		11.	ADDITIONS/C	HANGES TO OFFICERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VIDAL, HERMAN 18 NORTH BROAD STREET BROOKSVILLE FL	□ Delete	TITLE NAME STREET ADDRESS CITY~ST-ZIP	21125 Cor Brooksville	ter Blid FL 34601	⊠ Chai -5645	nge Addition 000	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOUGLAS, LORA 107A EDWARDS ROAD STARKE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		L 3209/-8	☐ Chai	nge 🔀 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERKOWITZ, RICHARD A ONE SE THIRD AVE., 15 FLOOR MIAMI FL 33131	C Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chai	nge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHUMACKER, III, JACOB 911 NORTH BLVD., W. LEESBURG FL 34748-5054	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Cha	nge 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD TURMAN, LLOYD A. 325 W. COLLEGE AVENUE TALLAHASSEE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tallahasse	eFL 32	☐ Chai	nge 💢 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ULRICH, RICHARD 100 SECOND AVENUE SOUTH, # ST. PETERSBURG FL 33701 certify that the information supplied with		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chai		

indicated on this report or supplemental report is true and accurrate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #





Epstein, Joseph A. 350 E. Las Olas Boulevard Suite 1000 Ft. Lauderdale, FL 33301

Howell, Winston K. 2120 Killarney Way Tallahassee, FL 32308-3402

Payne, Ann L. 200 E. Las Olas Boulevard Suite 1700 Ft. Lauderdale, FL 33301-2273