

2000 UNIFORM BUSINESS REPORT (UBR)

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

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

DOCUMENT # 740321

1. Entity Name

FLORIDA CPA POLITICAL ACTION COMMITTEE, INC.

Principal Place of Business 325 WEST COLLEGE AVENUE P.O. BOX 5437 TALLAHASSEE FL 32301 US	Mailing Address 325 WEST COLLEGE AVENUE P.O. BOX 5437 TALLAHASSEE FL 32314-5437
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-1807799	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TURMAN, LLOYD A.
325 WEST COLLEGE AVENUE
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name _____
 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) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	VIDAL, HERMAN
STREET ADDRESS	18 NORTH BROAD STREET
CITY-ST-ZIP	BROOKSVILLE FL
TITLE	D <input type="checkbox"/> Delete
NAME	DOUGLAS, LORA
STREET ADDRESS	107A EDWARDS ROAD
CITY-ST-ZIP	STARKE FL
TITLE	D <input type="checkbox"/> Delete
NAME	BERKOWITZ, RICHARD A
STREET ADDRESS	ONE SE THIRD AVE., 15 FLOOR
CITY-ST-ZIP	MIAMI FL 33131
TITLE	VP <input type="checkbox"/> Delete
NAME	SHUMACKER, III, JACOB
STREET ADDRESS	911 NORTH BLVD., W.
CITY-ST-ZIP	LEESBURG FL 34748-5054
TITLE	STD <input type="checkbox"/> Delete
NAME	TURMAN, LLOYD A.
STREET ADDRESS	325 W. COLLEGE AVENUE
CITY-ST-ZIP	TALLAHASSEE FL
TITLE	P <input type="checkbox"/> Delete
NAME	ULRICH, RICHARD
STREET ADDRESS	100 SECOND AVENUE SOUTH, #606
CITY-ST-ZIP	ST. PETERSBURG FL 33701

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2125 Cortez Blvd
STREET ADDRESS	Brooksville FL 34601-5645
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STARKE FL 32091-3964
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tallahassee FL 32301
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

CR2E037 19/99

Attachment
to 21618
#740321

Florida CPA Political Action Committee, Inc.
2000 Uniform Business Report
59-1807799
Line 11 Attachment
Additions

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