

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006835

**COPY**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

4.27.00

00 MAY 30 AM 9:10

4.28.00



MAY 1, 2000, ETC... SHE  
DO NOT WRITE IN THIS SPACE  
WIN FORWARD TO TAMPA

1. Entity Name  
**FLORIDA ASSOCIATION OF INTERNATIONAL EDUCATORS,**

Principal Place of Business Mailing Address  
4202 E FOWLER AVE 4202 E FOWLER AVE  
%ISSS, UNIV OF SOUTH FL, CPR 107 %ISSS, UNIV OF SOUTH FL, CPR 107  
TAMPA FL 33620 TAMPA FL 33620-9951

2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
City & State City & State  
Zip Country Zip Country

4. FEI Number **59-3641239**  Applied For  
 Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**AUSTELL, DAVID B JR**  
4202 E FOWLER AVE  
%ISSS, UNIV OF SOUTH FL, CPR 107  
TAMPA FL 33620

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City 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: **SEND XC OF UBR TO** 9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees Make Check Payable to Department of State

OFFICERS AND DIRECTORS	
ADDRESS ST-ZIP	FISCAL OFFICE DIV. OF CORPS. P.O. BOX 4327 <input type="checkbox"/> Delete
ADDRESS ST-ZIP	TAMPA, FL 33620 32391-0250 ATT: DEBBIE LOWIE (PERS. AND CONFID.) <input type="checkbox"/> Delete
ADDRESS ST-ZIP	PH: (850) 487-6979 <input type="checkbox"/> Delete
ADDRESS ST-ZIP	<input type="checkbox"/> Delete
ADDRESS ST-ZIP	<input type="checkbox"/> Delete
ADDRESS ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FAIE CHAIR SUSAN D'AMICO (D) P.O. BOX 3091 BOCA RATON, FL 33431 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FAIE TREASURER PROTEM DAVID B. AUSTELL, JR. (D) CPR 107, 4202 E. FOWLER AVE. TAMPA, FL 33620 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FAIE CHAIR-ELECT MARIA LEVISTE (D) UNIVERSITY PARK, GC 217 MIAMI, FL 33199 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST. USF BR 5/30 <input type="checkbox"/> Change <input type="checkbox"/> Addition

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: DATE: 4.27.00 DAYTIME PHONE: (813) 974.5206

POSTED JOURNAL TRANSACTIONS BY SWDN WITHIN BENEFITTING OLO AND SITE

AUDIT LOCATION - STATEWIDE  
 OLO 450000 - DEPARTMENT OF STATE  
 SITE 00 - DEPARTMENT OF STATE  
 SWDN S0000200875 ADOCNO V028194

OLO 495000 - UNIVERSITY OF SOUTH FLORIDA  
 SITE 00 - UNIVERSITY OF SOUTH FLORIDA  
 (813) 974-5659

TRANSACTION CODE	AMOUNT	CF	TC	OBJECT	AMOUNT	ACCOUNT CODE	BENEFITTING DATA	CF	TC	OBJECT
49 10 1 000210 48900100 50 040000 00	70.00		25	4990	70.00	45 20 2 130001 45300000 00 000100 00			45	
						INVOICE # N990000000				
TRANSACTION CODE TOTAL - 25	70.00				70.00					

REMITTED 05/19/2000

TR 96  
 45301010  
 R2  
 001006  
 000100  
 Corporate Fees

