

T03 000000624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

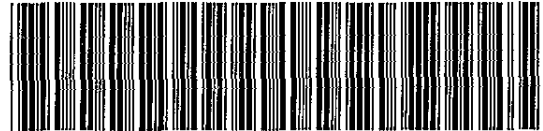
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

Called 5/21/03
Spoke w/ A. T. Gimbel
OK to add disclaimer
as required n/p



500019156075

05/21/03--01004--004 **87.50

T03-624

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
03 MAY 20 PM 1:47

Reviewed
by KB, JK
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
SECRETARY OF STATE

03 MAY 20 PM 4:24

RECEIVED

LAW OFFICES
Messer, Caparello & Self
A Professional Association

ALBERT T. GIMBEL

Post Office Box 1876
Tallahassee, Florida 32302-1876
Internet: www.lawfla.com

May 20, 2003

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32301

Re: Florida Democratic Party application for Service Mark registrations

To Whom It May Concern:

Enclosed are two (2) separate applications for the registration of two (2) different Service Marks. Also enclosed are three examples of each of the marks in use, along with a check in the amount of \$87.50 for each registration.

If there are any questions or if additional information is needed, please contact me at the number above. Thank you for your attention to this matter.

Sincerely,



Albert T. Gimbel

ATG:meh
Enclosures

cc: Allie Merzer, Communications Director
Florida Democratic Party

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAY 20 PM 1:47

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

TO: Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Name & address to whom acknowledgment should be sent:

Albert T. Gimbel

215 South Monroe Street, Suite 701

Tallahassee, FL 32301

(850) 222-0720

Daytime Telephone number

PART I

1. (a) Applicant's name: FLORIDA DEMOCRATIC PARTY

(b) Applicant's business address: 214 South Bronough Street

Tallahassee, FL 32302

City/State/Zip

(c) Applicant's telephone number: (850) 222-3411

Individual

Corporation

Joint Venture

Other: Organization

General Partnership

Limited Partnership

Union

If other than an individual,

(1) Florida registration number: N/A (2) Domicile State: Florida

(3) Federal Employer Identification Number: 59-0772903

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:
(i.e., furniture moving services, diaper services, house painting services, etc.)

Political consulting, fund raising, conventions, support services, and educational services.

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

N/A

(c) The mode or manner in which the mark is used:(i.e., labels, decals, newspaper advertisements, brochures, etc.)

Advertisements, letterhead, envelopes, business cards, stationary products, labels, napkins,

decals, buttons and signs.

(Continued)

(d) The class(es) in which goods or services fall:

Class 42 - Miscellaneous

PART II

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: June 1, 1999 (b) Date first used in Florida: June 1, 1999

PART III

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

The words "Florida Democratic Party" underlined with stars arranged in three rows appearing above the words.

English Translation N/A

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " Florida Democratic Party " APART FROM THE MARK AS SHOWN.

I, Albert T. Gimbel

being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct

Florida Democratic Party

Typed or printed name of applicant

Albert T. Gimbel

Applicant's signature or authorized person's signature
(List name and title)

STATE OF Florida

COUNTY OF Leon

On this 20th day of May, 2003, Albert T. Gimbel personally appeared before me,

who is personally known to me whose identity I proved on the basis of _____

FILED
STATE
DIVISION OF CORPORATIONS
03 MAY 20 PM 1:47



ANA CRUZ
EXECUTIVE DIRECTOR

POST OFFICE BOX 1758 • TALLAHASSEE, FLORIDA 32302
PHONE 850 222-3411 • FAX 850 222-0916
EMAIL CRUZ@floridademocraticparty.com
WEBSITE www.floridademocraticparty.com

Marilyn E. Harrod
Notary Public Signature

Notary's Printed Name

Commission Expires:

\$87.50 per class

