

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 706785

**FILED**  
**Feb 07, 2019**  
**Secretary of State**  
**9970916021CC**

**Entity Name:** FLORIDA STATE ASSOCIATION OF SUPERVISORS OF ELECTIONS, INC.

**Current Principal Place of Business:**

215 SOUTH MONROE STREET  
SUITE 825  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

P.O. BOX 350  
TALLAHASSEE, FL 32302 US

**FEI Number: 59-3348295**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LABASKY, RONALD A  
215 SOUTH MONROE STREET  
SUITE 825  
TALLAHASSEE, FL 32301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           LUX, PAUL  
Address        302 WILSON STREET N,  
                  SUITE 102  
City-State-Zip: CRESTVIEW FL 32536-3440

Title           PRESIDENT ELECT  
Name           JONES, TAMMY  
Address        421 S. COURT STREET  
City-State-Zip: BRONSON FL 32621-6520

Title           PAST PRESIDENT  
Name           SOUTHERLAND, DANA  
Address        43 US 19 N  
City-State-Zip: PERRY FL 32347

Title           DIRECTOR  
Name           LABASKY, RONALD A  
Address        P O BOX 350  
                  SUITE 825  
City-State-Zip: TALLAHASSEE FL 32309

Title           VP  
Name           LATIMER, CRAIG  
Address        601 E. KENNEDY BLVD.  
                  16TH FLOOR  
City-State-Zip: TAMPA FL 33602-4932

Title           SECRETARY  
Name           WILCOX, WESLEY  
Address        981 NE 16TH ST  
City-State-Zip: OCALA FL 34470-4205

Title           TREASURER  
Name           EARLEY, MARK  
Address        2990-1 APALACHEE PARKWAY  
City-State-Zip: TALLAHASSEE FL 32301-3678

*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: RONALD A LABASKY**

**DIRECTOR**

**02/07/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date