

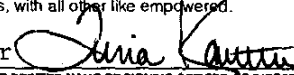
FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90404 030 ****61.25

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

94078388



DOCUMENT # 702262			
1. Entity Name FLORIDA COURT REPORTERS ASSOCIATION, INC.			
Principal Place of Business SUITE 101 222 S. WESTMONTE DRIVE ALTAMONTE SPRINGS, FL 32714		Mailing Address SUITE 101 222 S. WESTMONTE DRIVE ALTAMONTE SPRINGS, FL 32714	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		01292004 Chg-NP CR2E037 (10/03)	
4. FEI Number 59-1091007		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KAUTTER, TINA SUITE 101 222 S. WESTMONTE DRIVE ALTAMONTE SPRINGS, FL 32714		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KUNDID, PAULITA 150 S PALMETTO AVE #101 DAYTONA BEACH, FL 32114 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Greenspan, Richard 11700 NW 71st Place Parkland FL 33076 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STEPHENSON, MARY 128 LIVE OAK AVE DAYTONA BCH, FL 32126 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PED Johnson, Louise 1440 Salvadore St DeLand FL 32720 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LPP WEIRZBICKI, MICHAEL 220 W. GARDEN ST. PENSACOLA, FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Durando, Teresa 1350 River Reach Dr #318 Ft. Lauderdale FL 33315 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENDER, CINDY 717-2 NE 12 TERR BOYNTON BCH, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD 120 S Olive Ave #200 West Palm Beach FL 33401 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED KAUTTER, TINA 222 S WESTMONTE DR #101 ALTAMONTE SPRINGS, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: Tina Kautter 		4/28/04 407-774-7780	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

APR 29 2004