

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # 708293

1. Entity Name



FLORIDA ASSOCIATION OF ATTORNEY-CERTIFIED
PUBLIC ACCOUNTANTS, INC.

Principal Place of Business

Mailing Address

C/O WELLSICH METZGER AND STANTON, P.A.
8603 S DIXIE HWY., #207
MIAMI FL 33143

C/O WELLSICH METZGER AND STANTON, P.A.
8603 S DIXIE HWY., #207
MIAMI FL 33143



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/06)

City & State

City & State

4. FEI Number

59-1623459

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRAUM, SYDNEY S
201 ALHAMBRA CIRCLE
SUITE 801
MIAMI FL 33134

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 transferring)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	<input type="checkbox"/> Delete
VD	KURZER, MARTIN J	1951 NE 191ST DRIVE	NORTH MIAMI BEACH FL 33179	<input type="checkbox"/>
V	VOGEL, MARK R	201 SOUTH BISCAYNE BLVD., SUITE 880	MIAMI FL 33131	<input type="checkbox"/>
V	IBANEZ, SILVIA	659 AVENUE A, NW	WINTER HAVEN FL 33883	<input type="checkbox"/>
PD	TRAUM, SYDNEY S	55 SOUTH PROSPECT DRIVE	MIAMI FL 33133	<input type="checkbox"/>
V	COMITER, RICHARD B	250 AUSTRALIAN AVENUE, SOUTH	WEST PALM BEACH FL 33401	<input type="checkbox"/>
TD	METZGER, URSULA	8603 SOUTH DIXIE HIGHWAY, SUITE 207	MIAMI FL 33143	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Only by hand of Treasurer 02/20/07 305 662 7075