

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 19, 2005
Secretary of State

DOCUMENT# 740321

Entity Name: FLORIDA CPA POLITICAL ACTION COMMITTEE, INC.**Current Principal Place of Business:**325 WEST COLLEGE AVENUE
P.O. BOX 5437
TALLAHASSEE, FL 32301 US**New Principal Place of Business:****Current Mailing Address:**325 WEST COLLEGE AVENUE
P.O. BOX 5437
TALLAHASSEE, FL 32301 US**New Mailing Address:****FEI Number:** 59-1807799**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TURMAN, LLOYD A
325 WEST COLLEGE AVENUE
TALLAHASSEE, FL 32301 US**Name and Address of New Registered Agent:**ANDERSON, KATHRYN B
325 WEST COLLEGE AVENUE
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: KATHRYN B. ANDERSON

09/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: SHUMACKER, CECIL
Address: 911 NORTH BLVD., W.
City-St-Zip: LEESBURG, FL 347485054 US**Title:** STD () Delete
Name: TURMAN, LLOYD A
Address: 325 W. COLLEGE AVENUE
City-St-Zip: TALLAHASSEE, FL 32301 US**Title:** D () Delete
Name: EPSTEIN, JOSEPH A
Address: 515 E. LAS OLAS BLVD. 15TH FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33301**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** STD (X) Change () Addition
Name: ANDERSON, ANDERSON B
Address: 325 W. COLLEGE AVENUE
City-St-Zip: TALLAHASSEE, FL 32301 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KATHRYN B. ANDERSON

ST

09/19/2005

Electronic Signature of Signing Officer or Director

Date