

DOCUMENT # 752234

1. Entity Name

THE FLORIDA PARAPLEGIC ASSOCIATION

FILED
Jan 10, 2001 8:00 am
Secretary of State

01-10-2001 90148 018 ****61.25

Principal Place of Business: MILDRED LEVENSON, 7441 WAYNE AVE., APT. 3I, MIAMI BEACH FL 33141, US
Mailing Address: MILDRED LEVENSON, 7441 WAYNE AVE., APT. 3I, MIAMI BEACH FL 33141, US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Suite, Apt. #, etc., City & State, Zip, Country
3. Mailing Address: Suite, Apt. #, etc., City & State, Zip, Country

4. FEI Number 59-6194486 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent: LEVENSON, MILDRED, 7441 WAYNE AVE., APT. 3I, MIAMI BEACH FL 33141

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.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include LEVENSON, MILDRED; GLASCOW, MAC; WOOD, DENNY; SHOTZ, FRED; BURNETT, MARGIE; LAWRENCE, JEANNE.

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes checkboxes for Change and 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...

SIGNATURE: SIGNATURE REQUIRED 1/5/01 (305) 868-3361 MILDRED LEVENSON, Pres.

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CR2E037 (10/00)