2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 837659** Jul 25, 2000 8:00 am 1. Entity Name Secrétary of State ASSOCIATION OF PUBLIC-SAFETY COMMUNICATIONS OFFI 07-25-2000 90074 001 ***210.00 Principal Place of Business Mailing Address 2040 SOUTH RIDGEWOOD AVENUE 2040 SOUTH RIDGEWOOD AVENUE SOUTH DAYTONA FL 32119 SOUTH DAYTONA FL 32119 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 63-0461885 Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) RAMSEY, JOHN 2040 SOUTH RIDGEWOOD AVENUE SOUTH DAYTONA FL 32119 City Zin 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 John Ramsey SIGNATURE /19/00 (NOTE: Registered Agent signature required when reinstating) **FILE NOW: FEE IS \$61.25** 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees After September 13, 2000 min. will be \$236.25 Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. DV ☐ Delete Addition TITLE ☐ Change TITLE HANNA, JOE NAME NAME Hanna, Joe STREET ADDRESS STREET ADDRESS 2040 S RIDGEWOOD AVE 2040 S Ridgewood Ave CITY-ST-7IP CITY-ST-ZIP S DAYTONA FL S Daytona FL 32119 TITLE D ☐ Delete TITLE ☐ Change ☐ Addition NASH. GLEN NAME NAME Nash, Glen STREET ADDRESS STREET ADDRESS 2040 S RIDGEWOOD AVE 2040 S Ridgewood Ave S Daytona FL 32119 CITY-ST-ZIP S DAYTONA FL 32119 ☐ Addition ☐ Delete TITLE ☐ Change TITLE DV GALLAGHER, LYLE NAME NAME Gallagher, Lyle STREET ADDRESS STREET ADDRESS 2040 S RIDGEWOOD AVENUE 2040 S Ridgewood Ave CITY-ST-ZIP CITY-ST-7IF S DAYTONA FL 32119 S-Daytona FL 32119 DS ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME RAMSEY, JOHN Ramsey, John STREET ADDRESS STREET ADDRESS 2040 SOUTH RIDGEWOOD AVE 2040 S Ridgewood Ave CITY-ST-ZIP CITY-ST-ZIP **SOUTH DAYTONA FL 32119** <u>S Daytona FL 32119</u> ☐ Change ☐ Addition TITLE TITLE Selete NAME NAME KEATING, J T STREET ADDRESS STREET ADDRESS 2040 SOUTH RIDGEWOOD AVENUE CITY-ST-ZIP CITY-ST-7IP SOUTH DAYTONA FL D TITLE ☐ Delete TITLE Change. ☐ Addition Bradshaw, Thera NAME NAME STREET ADDRESS STREET ADDRESS 2040 S Ridgewood Ave CITY-ST-ZIP CITY-ST-7IP S Daytona FL 32119 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, withfall other like empowered.

FZ-95.OWRED

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: