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**Feb 27, 1999 8:00 am**  
**Secretary of State**

02-27-1999 90086 031 \*\*\*\*70.00

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NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N05692**

1. Corporation Name  
**FLORIDA ASSOCIATION OF PROFESSIONAL FAMILY MEDIA TORS, INC.**

Principal Place of Business % MELVIN A. RUBIN 111 MAJORCA AVENUE CORAL GABLES FL 33134 US	Mailing Address % MELVIN A. RUBIN 111 MAJORCA AVENUE CORAL GABLES FL 33134 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	3. Date Incorporated or Qualified 10/16/1984	4. FEI Number 59-2526792 Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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9. Name and Address of Current Registered Agent <b>RUBIN, MELVIN A 111 MAJORCA AVE. CORAL GABLES FL 33134</b>				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	FLEISCHER, JANICE M 801 ORTEGA AVENUE CORAL GABLES FL 33134	1.1 TITLE T	Laurie Pine Farber 12094 Old Country Road Wellington, FL 33414
TITLE PE	BLANTON, NANCY T 650 E. BAYA AVENUE LAKE CITY FL 32025	2.1 TITLE S	NARDA Riese 2096 38th Avenue Vero Beach, FL 32960
TITLE T	KAHN, ALAN 18043 LAKE BEND DRIVE JUPITER FL 33458	3.1 TITLE D	Diane Godard THE Crossings, Suite 514, 28471 US 19 No. CLEARWATER, FL 34621
TITLE D	CASTAGNA, CHARLES 311 S. MISSOURI AVENUE CLEARWATER FL 33756	4.1 TITLE D	DAN WARNER Suite C, 4741 ATLANTIC Blvd Jacksonville, FL 32207
TITLE D	DOELKER, RICHARD E JR. 4555 LAVALLET LANE PENSACOLA FL 32504	5.1 TITLE D	Penny Levin 1414 Rose Court Melbourne, FL 32935
TITLE D	DULBERG, ROBERT 100 S.E. 2ND STREET, SUITE 2100 MIAMI FL 33131	6.1 TITLE	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Janice M. Fleischer SIGNATURE REQUIRED: Janice M. Fleischer 26/99 305-4453721

CR2E037 (1/98)