

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N08312**

1. Entity Name

Florida Association of Professional Process

Principal Place of Business

Mailing Address

Servers, Inc.

FILED

01 MAR 19 AM 4:32

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2. Principal Place of Business

655 East Tennessee

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1777

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Tallahassee, FL

City & State

Tallahassee, FL

4. FEI Number

59-2463953

Applied For

Not Applicable

Zip

Country

32308

USA

Zip

Country

32302

USA

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

Jack Lippman
4030 Powerline Rd
Ft. Lauderdale, FL 33309

Name

Todd Vause

Street Address (P.O. Box Number is Not Acceptable)

655 East Tennessee St.

City

Tallahassee

FL

Zip Code

32308

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.

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-03/28/01--01098--018

*******61.25 *****61.25**

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

TITLE	P	☐ Delete
NAME	William Todd Vause	
STREET ADDRESS	655 E. Tennessee St.	
CITY-ST-ZIP	Tallahassee FL 32308	
TITLE	D	☐ Delete
NAME	Jack Lippman	
STREET ADDRESS	4030 Powerline Road	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
TITLE	T	☒ Delete
NAME	Wayne Hanna	
STREET ADDRESS	292 Duffie Avenue	
CITY-ST-ZIP	Greensboro, FL 32330	
TITLE	D	☒ Delete
NAME	Donald S. Eisenbers	
STREET ADDRESS	111 North orange Ave #1030	
CITY-ST-ZIP	Orlando, FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P	☒ Change ☐ Addition
NAME	William Todd Vause	
STREET ADDRESS	655 East Tennessee St.	
CITY-ST-ZIP	Tallahassee, FL 32308	
TITLE	D	☒ Change ☐ Addition
NAME	Jack Lippman	
STREET ADDRESS	4030 Powerline Rd.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
TITLE	T	☒ Change ☐ Addition
NAME	Margie Zawaki	
STREET ADDRESS	2831 Ringling BLVD #121-F	
CITY-ST-ZIP	Sarasota, FL 34237	
TITLE	V	☐ Change ☒ Addition
NAME	Denny Howley	
STREET ADDRESS	1301 10th street	
CITY-ST-ZIP	Key West, FL 33040	
TITLE	D	☐ Change ☒ Addition
NAME	Steve Lehr	
STREET ADDRESS	10636 N.W. 10th Road	
CITY-ST-ZIP	Gainesville, FL 32606	
TITLE	D	☐ Change ☒ Addition
NAME	Mickey Eagle	
STREET ADDRESS	7611 S. orange Blossom Tr. #324	
CITY-ST-ZIP	Orlando, FL 32809	

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, with all other like empowered.

SIGNATURE:

William Todd Vause
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

850-656-2605

CR2E037 (11/00)