2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

B. Roberts MAY 03 2005

DOCUMENT # N08312

1. Entity Name
FLORIDA ASSOCIATION OF PROFESSIONAL PROCESS SERVERS, INC.

FILED
APR 29 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
3293 FRUITVILLE RD. SUITE 106 SARASOTA, FL 34237 US	3293 FRUITVILLE RD. SUITE 106 SARASOTA, FL 34237 US

04082005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
818 E New Haven Ave	818 E New Haven Ave
Suite, ~~Apt. #, etc.~~ ZB	Suite, Apt. #, etc. Suite ZB
City & State Melbourne, FL	City & State Melbourne FL
Zip 32901 Country Brevard	Zip 32901 Country Brevard

4. FEI Number 59-2463953 ☐ Applied For ☐ Not Applicable

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
ZAWACKI, MARGARET L 3293 FRUITVILLE RD. SUITE 106 SARASOTA, FL 34237	Name: DIANA WARDWELL Street Address (P.O. Box Number is Not Acceptable): 818 E New Haven Avenue Suite 2B City: Melbourne FL Zip Code: 32901

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Diana Wardwell, President DIANA Wardwell 4-21-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	X ZAWACKI, MARGARET L 2831 RINGLING BLVD., SUITE 121-F SARASOTA, FL 34237	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec 000054014920 05/06/05--01066--006 **61.25	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRUMMEY, BEVERLY 380 RIGGS AVE MELBOURNE, FL 32951	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Tammie Thornton 3214 Samantha Drive Cantonment, FL 32533-7414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	X WARDWELL, DIANA 818 E. NEW HAVEN AVE., SUITE 2-B MELBOURNE, FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres.	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RANDALL, LANCE 7731 N.W. 6TH COURT PEMBROKE PINES, FL 33024	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Jack Lippman 4030 Powerline Rd FT. Lauderdale, FL 33309	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	X VP COMPTON, MIKE P.O. BOX 5848 TALLAHASSEE, FL 32314	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP GASTON, BARRY P.O. BOX 166 LAKE WALES, FL 33859	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director MARK Wooster P.O. Box 441076 Jacksonville, FL 32222	☐ Change ☒ 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; 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: Mike Compton Michael R. Compton, VP 4/19/05 850-877-9809
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #