2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08312

FILED Mar 28, 2008 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 1288 CEDAR CENTER DRIVE TALLAHASSEE, FL 32301 **Current Mailing Address: New Mailing Address:** 1288 CEDAR CENTER DRIVE TALLAHASSEE, FL 32301 US FEI Number: 59-2463953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COMPTON, MICHAEL R 1288 CEDAR CENTER DRIVE TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ZAWACKI, MARGARET L Name: Name: 3293 FRUITVILLE ROAD, STE 106 Address: Address: City-St-Zip: SARASOTA, FL 34237 City-St-Zip: Title: () Delete Title: () Change () Addition THORNTON, TAMMIE Name: Name: Address: 3214 SAMANTHA DR Address: City-St-Zip: CANTONMENT, FL 325337414 City-St-Zip: Title: () Delete Title: (X) Change () Addition WARDWELL, DIANA WARDWELL, DIANA Name: Name: 818 E. NEW HAVEN AVE., SUITE 2-B Address: Address: 1964 DAIRY ROAD City-St-Zip: MELBOURNE, FL 32901 City-St-Zip: WEST MELBOURNE, FL 32904 () Delete Title: D Title: () Change () Addition DEAL, JANET Name: Name: Address: 8450 S.R. 84 Address: City-St-Zip: FT LAUDERDALE, FL 33324 City-St-Zip: Title: () Delete Title: () Change () Addition MULBERRY, LAURIE Name: Name: 4050 LAKESPUR CIRCLE SOUTH Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: () Delete Title: (X) Change () Addition HOWLEY, DENNY MUSSER, BOB Name: Name: Address: 1301 10TH STREET Address: 5415 LAKE HOWELL ROAD #327 KEY WEST, FL 33040 WINTER PARK, FL 32792 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL R. COMPTON PRES 03/28/2008