

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 15, 2003 8:00 am
Secretary of State

04-15-2003 90124 027 *****61.25

DOCUMENT # N08312

1. Entity Name

**FLORIDA ASSOCIATION OF PROFESSIONAL PROCESS SERV
ERS, INC.**



Principal Place of Business

**655 E. TENNESSEE ST.
TALLAHASSEE FL 32308
US**

Mailing Address

**P.O. BOX 1777
TALLAHASSEE FL 32302**

2. Principal Place of Business

**2831 Ringling BLVD
Suite, Apt. #, etc.
Suite 121-F**

3. Mailing Address

**2831 Ringling BLVD
Suite, Apt. #, etc.
Suite 121-F**

City & State

Sarasota, FL

City & State

Sarasota, FL

Zip

34237

Country

USA

Zip

34237

Country

USA



☒ CHECK HERE IF MAKING CHANGES

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

**VAUSE, TODD
655 E. TENNESSEE ST.
TALLAHASSEE FL 32308**

7. Name and Address of New Registered Agent

Name

Same

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

City

FL

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-14-03

FILE NOW: FEE 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VAUSE, WILLIAM TODD 655 E. TENNESSEE ST. TALLAHASSEE FL 32308	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CRUMMEY, BEVERLY 380 RIGGS AVE MELBOURNE FL 32951	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ZAWAKI, MARGIE 2831 RINGLING BLVD., #121-F SARASOTA FL 34237	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOWLEY, DENNY 1301 10TH STREET KEY WEST FL 33040	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHANCELLOR, NEAL 1836 WILLIS ST. NE PALM BAY FL 32905	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEAL, MURRAY 8450 STATE ROAD 84 FT LAUDERDALE FL 33324	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Vause, William Todd 655 E. Tennessee St. Tall. FL. 32308	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Crummey, Beverly 380 Riggs Ave Melbourne, FL 32951	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Zawaki, Margie 2831 Ringling BLVD suite 121-F Sarasota, FL 34237	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Lehr, Steve 10636 NW 10th Road Gainesville, FL 32606	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Compton, Mike P.O. Box 5848 Tall. FL. 32314	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Gaston, Barry P.O. Box 804 Lake Wales, FL 33859	☐ 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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-14-03 850-656-2605

CR2E037 (10/02)