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NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #1. Corporation Name N10603

(1)

FLORIDA ASSOCIATION OF PARKS AND RECREATION ADMI NISTRATORS, INC.

C/O THOMAS L. TAPP 301 N. ANDREWS AVENUE

Principal Place of Business

Mailing Address

C/O THOMAS L. TAPP 301 N. ANDREWS AVENUE



FORT LAUDERDALE FL 33301-1019 2. Principal Place of Business			FORT LAUDERDALE FL	FORT LAUDERDALE FL 33301-1019				- 			
							Date Incorporated or Qualified 08/07/1985	08/07/1985 02/06/1995			
				2a. Mailing Address			4. FEI Number Applied			Applied For	
21 Thomas L. Tapp Suite Apt. # etc.				26 Thomas L. Tapp			59-2588901 Not Applicab				
1350 West Broward Blvd.			l. ₂₇ 1350 West 1				. Certificate of Status Desired	See Required			
City & State 23 Fort Lauderdale, FL				28 Fort Lauderdale, FL			Election Campaign Financing Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·			
Ζφ 24 33312		Country	Zip	⊢-,	intry	8	. This corporation has liability for in	itangible ta			
24 33312 25 Broward 29 33312 9. Name and Address of Current Registered Agent					Broward Florida Statutes Yes No						
	9. Maille	and Address of Cur	rent Hegistered Agent		541 11	10	. Name and Address of New Re	gistered /	lgent		
					81 Name	The	omas L. Tapp				
TAPP, THOMAS L.					82 Street Address (P.O. Box Number is Not Acceptable)						
301 N. ANDREWS AVENUE					1350 West Broward Boulevard						
FORT LAUDERDALE FL 33301					83						
					84 City				Jec 3	- O- d-	
					,	Fort 1	Lauderdale	FL	85 Zij	p Code 3312	
11. Pursuant to	the provisi	ons of Sections 617.06	502 and 617.1508, Florida Statutes	, the abo	ve-named co	orporation	submits this statement for the purp	ose of cha	nging its r	registered office	
			lorida Such change was authorized lection 617,0503, Florida Statutes.	by the o	corporation's	board of d	lirectors. I hereby accept the appoi	ntment as	registered	d agent. I am	
SIGNATURE											
• 5	ilg nature, typed	or printed name of registered as	gent and title if applicable (NO!)	Rogistered	Agent signature re	equired whor i	einstaling)	DATE			
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICE	ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition			
TITLE	ST		DELETE	11 TI	TLE				7 Change	Addition	
NAME		THOMAS L		1.2 N				•	-		
STREET ADDRESS	et address 1350 West Broward Boulevard						SAME				
CITY-ST-ZIP		AUDERDALE FL			reet address Ty-st-zip						
TITLE	С		DELETE			D Change		Addition			
NAME	PRITCH	ARD, DAVE		2 2 NA		_	chard, Dave	—	_ onlings	L.J Addition	
STREET ADDRESS		X 38 N/A		23 \$76		P.O. Box 38 N/A					
CITY-ST-ZIP	OCALA				ITY-ST-ZIP	1	•				
TITLE	D	· · · · · · · · · · · · · · · · · · ·	DELETE	3 1 TI			la, FL		n Channa	fin base	
NAME	FERLITA, ROSS			32 N/		C		4	Change	Addition	
STREET ADDRESS	7525 NO	•					rman, Robert				
CITY-ST-ZIP	TAMPA				REET ADDRESS) Miramar Parkway				
TITLE	D D	1 -	DELETE	3.4. C	TY-ST-ZIP		mar, FL 33023	- Al	7 o.	- 	
NAME	KENT. S	SHARON	Dottett			D	**	Z	Change	☐ Addition \	
STREET ADDRESS		W 45 STREET		4. 2 N			Harriet			•	
CITY-ST-ZIP	DAVIE F				REET ADDRESS		1 N.E. 19 Avenue		_	,	
TITLE	DAVIC F	<u> </u>	DELETE		Y-ST-ZIP		h Miami Beach, FL				
NAME	-	DEET JOUN	Deceie	5 1 TIT		D		<u> </u>	Change	Addition V	
STREET ADDRESS		REET, JOHN		52 NA			es, Richard				
1		XANDRIA BLVD			REET ADDRESS		2 S.W. Highway 314				
CITY-ST-ZIP	OVIEDO	<u>PL</u>			Y-SI-ZIP	_0ca1	a, FL 34470				
TITLE	D	A115	DELETE	6 1 TiT	-		-] Change	Addition	
NAME	MILLER,			6.2 NA	ME		្នុម្ហាប្តីប្រាក្សាវ ខ្ទុក	541	\mathbb{S}		
STREET ADDRESS		IO MILITARY TR		6351	REET ADDRESS		30000180 sant6/02/060107 ***61.25	'3Ŋ <u>3</u>	6		
CITY-ST-ZIP	<u>TALLAH</u>	ASSEE FL		6.4 CIT	Y-ST-ZIP		***51.25				
14. I do hereby certify that t	certify that he informati	the information supplier	d with this filing is voluntarily furnish	ed and o	does not qual	lify for the	exemption stated in Section 119.07	'(3)(k), Flori	da Statuti	es. I further	
oath; that I	arn an office	er or director of the con	nnual report or supplemental annual poration or the receiver or trustee a	mpower empower	i due and acc ed to execute	curate and a this repor	that my signature shall have the sa t as required by Chapter 617. Flori	ime legal e da Statutes	ifect as if	made under	

appears in Block 12 or Block 13 if changed, or on an attachment with an address. Thomas L. Tapp SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/23/96

Date

Daytinie Phone #