## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 30, 2001 8:00 am <sup>8</sup> Secretary of State DOCUMENT # N10603 FLORIDA ASSOCIATION OF PARKS AND RECREATION ADMI 04-30-2001 90312 042 \*\*\*\*61.25 Principal Place of Business Mailing Address THOMAS L. TAPP THOMAS L. TAPP 1350 WEST BROWARD BLVD. 1350 WEST BROWARD BLVD. mu033009 FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2588901 Not Applicable Zip Country Country **\$8.75** Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TAPP, THOMAS L. 1350 W. BROWARD BLVD. FORT LAUDERDALE FL 33312 City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change Addition TITLE ☐ Delete TITLE TAPP, THOMAS L NAME STREET ADDRESS STREET ADDRESS 1350 WEST BROWARD BOULEVARD CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL Change ☐ Addition DC Delete TITLE TITLE SCOTT, GREG NAME NAME STREET ADDRESS STREET ADDRESS 215 NW DUVAL STREET CITY-ST-ZIP CITY-ST-ZIE LIVE OAK FL 32060 Director ☐ Change X Addition D X Delete TITLE TITLE Patricia Evans NAME FERLITA, ROSS NAME STREET ADDRESS Datona Bch Leisure Services STREET ADDRESS 7525 NORTH BLVD. CITY-ST-7/P CITY-ST-ZIP PO BOx 2451 Daytona Bch, FL 32115-2451 **TAMPA FL 33604** Director Change X Addition Delete TITLE TITLE DOUGHNEY, JACK NAME Robert Harbin NAME

CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34116 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(). 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 trusted 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 add with all other

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NAME

CITY-ST-ZIP

P.O BOX 760 N/A

FT PIERCE FL

GOMEZ, MICKEY

**BOCA RATON FL** 

RAMSEY, MARLA

201 WEST PALMETTO PARK RD

3300 SANTA BARBARA BLVD.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☑ Delete

□ Delete

Broward Co. Pks & REcreation

950 NW 38 St. Ft. Laud. FL

Dan Loubier

Director

Kissimmee Pks & Rec

Kissimmee, FL 34741

Ocoee Recreation Dept.

101 N. Church St.

Bruce Nordquist

Daytime Phone #

33309

Change

Change

Addition

X Addition