2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State
04-29-2004 90353 005 ****61.25

DOCUMENT # N18206

1. Entity Name
FLORIDA PUBLIC PERSONNEL ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% DAVID V. KORNREICH 776 N.E. 125TH STREET NORTH MIAMI, FL 33161	255 SOUTH ORANGE AVENUE STE. 1525, CNA TOWER ORLANDO, FL 32801 US

04262004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2808589 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KORNREICH, DAVID V.
SUITE 1525, CNA TOWER
255 SOUTH ORANGE AVENUE
ORLANDO, FL 32801

7. Name and Address of New Registered Agent

Name

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 George A Brooks Jr.
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

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	S ROMERO, GERMAN 500 SOUTH ORANGE AVE. ORLANDO, FL 32801	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Debbie McDonald 150 N. Lakeshore Dr. Ocoee, FL 34761 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RODGERS, JIM 601 S.E. 25TH AVE. OCALA, FL 34471	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD George Brooks 228 S. Massachusetts Ave. Lakeland, FL 33801 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PED HARDEN, PERCY 330 WEST CHURCH ST. BARTOW, FL 33831	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PED Arlette Steinberger 100 No. Andrews Ave. Ft. Lauderdale, FL 33301 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP STEINBERGER, ARLETTE 100 NO. ANDREWS AVE FORT LAUDERDALE, FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP German Romero 500 S. Orange Ave. Orlando, FL 32802 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PP LASTER, DEBRA 7501 NORTH JOG RD WEST PALM BEACH, FL 33412	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PP Linda Skelton 2401 S.E. Monterey Road Stuart, FL 34996 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SKELTON, LINDA 18500 MURDOCK CIR PORT CHARLOTTE, FL 33948	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Percy Harden 330 West Church Street Bartow, FL 33831 — ☒ 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: George A Brooks Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #