2001 UNIFORM BUSINESS REPORT (UBR)

05-11-2001 90011 025 ****61.25
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG 23 PM 12:01

DOCUMENT # N27097

1. Entity Name

ATLANTIC PROFESSIONAL PHOTOGRAPHERS ASSOCIATION,

Principal Place of Business	Mailing Address
5090 DALEHURST DR COCOA FL 32926 US	5090 DALEHURST DR COCOA FL 32926 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4815 Smith Field Rd.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Melbourne FL	City & State: SAME
Zip: 32934 Country: BREVARD	Zip: Country:

4. FEI Number: 59-2961711 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WHEELER, MIKE 5090 DALEHURST DR COCOA FL 32926	Name: OTTO LENKE Street Address (P.O. Box Number is Not Acceptable): 4815 Smith Field Rd Melbourne, FL. 32934 City: FL Zip Code: 32934

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: [signature] TREASURER. 04-15-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BOGROM, GARY 467 FORREST AVE, 119 COCOA FL	☐ Delete	(P) Julie Hughes 5126 S.E. Federal Hwy Stuart, FL. 34957	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CROUCH, SUE 599 SHERWOOD AVE SATELLITE BEACH FL 32937	☐ Delete	(VP) Nick Nichols 593 Comanche Ave Melbourne, FL. 32935	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SKROBOT, LEE 6785 CALIPA AVE COCOA FL 32927	☒ Delete	(D) Secretary Mike Hillger Melbourne, FL. 32935	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAVID A. SHIRAH 990 CAROLINA CIRCLE TITUSVILLE FL	☒ Delete	(D) Resigned Stan Rhoden 1894 Sarno Rd. Melbourne FL. 32935	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WHEELER, MIKE 5090 DALEHURST DR COCOA FL 32926	☒ Delete	(T) Resigned Otto Lenke 4815 Smith Field Rd. Melbourne, FL. 32934	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LAMBERT, ROBIN 3206 S HOPKINS AVE TITUSVILLE FL 32780	☒ Delete	(E) Editor Sue Crouch 599 Sherwood Ave Satellite Bch, FL. 32937	☒ Change ☐ Addition SP

CR2E037 (10/00)

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] TREASURE 4-15-01 321-255-0828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #