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N27558

CORPORATION ANNUAL REPORT 1995

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

95 FEB 24 AM 11:52
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # N27558 (8)

1. Corporation Name

ASSOCIATED PUBLIC-SAFETY COMMUNICATION OFFICERS, INC., FLORIDA CHAPTER

Principal Place of Business	Mailing Address
C/O WILLIAM E.SHERMAN 2332 MEATH DRIVE TALLAHASSEE FL 32308	C/O WILLIAM E.SHERMAN 2332 MEATH DRIVE TALLAHASSEE FL 32308

3. Date Incorporated or Qualified: 07/22/1988
3a. Date of Last Report: 01/21/1994
4. FEI Number: 59-2311896 — Applied For / Not Applicable
5. Certificate of Status Desired [X] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status [X] — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes [ ] Yes [X] No

2. Principal Place of Business: 21 ___ Suite, Apt. #, etc. 22 ___ City & State 23 ___ Zip 24 ___ Country 25 ___

2a. Mailing Address: 26 ___ Suite, Apt. #, etc. 27 ___ City & State 28 ___ Zip 29 ___ Country 30 ___

9. Name and Address of Current Registered Agent

DON L FOX
2332 MEATH DRIVE
TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	WARD, MARILYN	100 S. HUGHEY AVE.	ORLANDO FL
D	DZOBA, NANCY	1300 W BROWARD BLVD	FT LAUDERDALE FL
TD	FOX, DON L.	2332 MEATH DR.	TALLAHASSEE FL
D	STEWART, MINDY	P O BOX 1270	OCALA FL
SD	MASSEY, KAREN P.	913 SE 5 ST	GAINESVILLE FL
PD	KERR, RANDALL W	913 SE 5TH STREET	GAINESVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

No.	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1	President DP	Vicki Pegram	1 Airport Boulevard	Orlando, Florida 32827-4399	[X]	[ ]
2	Vice President DV	Natalie Duran-Carvajal	5680 S.W. 87th Avenue	Miami, Florida 33173	[X]	[ ]
3	Secretary SD	Terry R. Nehring	3701 12th Street	Tampa, Florida 33603	[ ]	[ ]
4	Treasurer TD	Don Fox	2332 Meath Drive	Tallahassee, Florida 32308	[ ]	[ ]
5	Past President D	Nancy Dzoba	1300 W. Broward Boulevard	Ft. Laudardale, Florida 33312	[X]	[ ]
6	Director D	Mindy Stewart	P. O. Box 1270	Ocala, Floirda 34478	[X]	[ ]

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Don L. Fox — 02-02-95 — 904/488-8537

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0027322