

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N27558** (8)

1. Corporation Name

ASSOCIATION OF PUBLIC SAFETY COMMUNICATIONS OFFICIALS-INTERNATIONAL, 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
02/24/1995

2. Principal Place of Business
21 **3701 12th Street**

2a. Mailing Address
26 **3701 12th Street**

4. FEI Number
59-2311896

Applied For
Not Applicable

Suite, Apt. #, etc.
22 **c/o Terry Nehring**

Suite, Apt. #, etc.
27 **c/o Terry Nehring**

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

City & State
23 **Tampa, FL**

City & State
28 **Tampa, FL**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip
24 **33603**

Country
25 **US**

Zip
29 **33603**

Country
30 **US**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FOX, DON L
2332 MEATH DRIVE
TALLAHASSEE FL 32308**

81 Name **Randall W. Kerr**
82 Street Address (P.O. Box Number is Not Acceptable)
913 S.E. 5th Street
83 **c/o Alachua County Sheriff's Office**
84 City **Gainesville, FL** 85 Zip Code **32602**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Randall W. Kerr* **Randall W. Kerr** **3-11-96**

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 **PD** ☒ DELETE
NAME **PEGRAM, VICKI**
STREET ADDRESS **1 AIRPORT BLVD.**
CITY-ST-ZIP **ORLANDO FL 32857-4399**

TITLE **VD** ☒ DELETE
NAME **DURAN-CARVAJAL, NATALIE**
STREET ADDRESS **5680 SW 87TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33173**

TITLE **SD** ☐ DELETE
NAME **NEHRING, TERRY R**
STREET ADDRESS **3701 12TH STREET**
CITY-ST-ZIP **TAMPA FL 33603**

TITLE **TD** ☒ DELETE
NAME **FOX, DON**
STREET ADDRESS **2332 MEATH DR.**
CITY-ST-ZIP **TALLAHASSEE FL 32308**

TITLE **D** ☐ DELETE
NAME **DZOBA, NANCY**
STREET ADDRESS **1300 W. BROWARD BLVD.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **D** ☒ DELETE
NAME **STEWART, MINDY**
STREET ADDRESS **PO BOX 1270**
CITY-ST-ZIP **OCALA FL 34478**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☐ Change ☒ Addition
1.2 NAME **DURAN-CARVAJAL, NATALIE**
1.3 STREET ADDRESS **5680 SW 87 AVE**
1.4 CITY-ST-ZIP **MIAMI, FL 33173**

2.1 TITLE **VD** ☐ Change ☒ Addition
2.2 NAME **LUKE, BARRY H.**
2.3 STREET ADDRESS **721 NW 6th ST**
2.4 CITY-ST-ZIP **GAINESVILLE, FL 32601**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE **TD** ☐ Change ☒ Addition
4.2 NAME **KERR, RANDALL W.**
4.3 STREET ADDRESS **913 SE 5th ST**
4.4 CITY-ST-ZIP **GAINESVILLE, FL 32601**

5.1 TITLE **D** ☐ Change ☐ Addition
5.2 NAME **DZOBA, NANCY**
5.3 STREET ADDRESS **1300 W. BROWARD BLVD**
5.4 CITY-ST-ZIP **FT. LAUDERDALE, FL 33312**

6.1 TITLE **D** ☐ Change ☒ Addition
6.2 NAME **D'ORAZIO, DEBBIE**
6.3 STREET ADDRESS **3301 E. TAMiami TRAIL, BLDG J**
6.4 CITY-ST-ZIP **NAPLES, FL 33962**

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:

Randall W. Kerr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-96

(352) 955-2528

Date

Daytime Phone #

CR2E037 (12/95)