

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90124 049 ****70.00

DOCUMENT # N27558

1. Entity Name

ASSOCIATION OF PUBLIC SAFETY COMMUNICATIONS OFFICIALS-INTERNATIONAL, INC. FLORIDA CHAPTER

Principal Place of Business

Mailing Address

C/O ROBERT LUKE
 PO BOX 20726
 TAMPA FL 33622
 US

PO BOX 20726
 C/O ROBERT LUKE
 TAMPA FL 33622
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2311896

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KERR, RANDALL W.
2621 SE HAWTHORNE ROAD

GAINESVILLE FL 32641

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.

SIGNATURE

Randall W. Kerr - Treasurer
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

2-13-2002

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 **SD** ☐ Delete
 NAME **LUKE, ROBERT**
 STREET ADDRESS **4619 DRIESLER CIR**
 CITY-ST-ZIP **TAMPA FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PD** ☒ Delete
 NAME **NELSON, RICHARD**
 STREET ADDRESS **2631 SE 3RD STREET**
 CITY-ST-ZIP **OCALA FL 34471**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **SORLEY, THOMAS**
 STREET ADDRESS **3663 S JOHN YOUNG PARKWAY**
 CITY-ST-ZIP **ORLANDO FL 32835**

TITLE **PD** ☒ Change ☐ Addition
 NAME **Sorley, Thomas**
 STREET ADDRESS **3663 S. John Young Parkway**
 CITY-ST-ZIP **Orlando, FL 32835**

TITLE **TD** ☐ Delete
 NAME **KERR, RANDALL W.**
 STREET ADDRESS **2621 SE HAWTHORNE ROAD**
 CITY-ST-ZIP **GAINESVILLE FL 32641**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE **D** ☐ Change ☒ Addition
 NAME **Luke, Barry**
 STREET ADDRESS **6590 Amory Court**
 CITY-ST-ZIP **Winter Park, FL 32782**

TITLE **VD** ☒ Delete
 NAME **D'Orazio, Debbie**
 STREET ADDRESS **3301 E TAMiami TR BLDG J**
 CITY-ST-ZIP **NAPLES FL**

TITLE **VD** ☐ Change ☒ Addition
 NAME **Jones, Michael**
 STREET ADDRESS **1918 Ashley Oaks Court**
 CITY-ST-ZIP **St. Cloud, FL 34771**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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:

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

2-13-2002

Date

352-264-6665

Daytime Phone #

CR2E037 (9/01)