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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N49396

1. Corporation Name

THE ACADEMY OF FLORIDA TRIAL LAWYERS RESEARCH AN D EDUCATION FOUNDATION, INC.

Principal Place of Business
218 S MONROE ST
TALLAHASSEE FL 32301

Mailing Address

218 S MONROE ST TALLAHASSEE FL 32301

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90008 036 ****61.25



Principal Place of Business 2a. Mailing Address						3. Date Incorporated or Qualifed			
— ·	iace of business	26				06/16/1992			
Suite, Apt.	# etc	Suite, Apt. #, etc.		_		4. FEI Number	Ap	lied For	
22	, , o.c.	27				59-3144722	No	t Applicable	
City & Etat	le	City & State				5. Certificate of Status Desired	\$8.75 A	ditional	
23		28				5. Certifcate of Status Desired	Fee Re	quired	
Zip	Country	Zip	Cou	ntry		6. Election Campaign Financing	\$5.00 May Be		
24	25	29	30			Trust Fund Contribution	Added to Fees		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		
				81	Name				
CARRITH	IERS, SCOTT			82 Street Address (P.O. Box Number is Not Acceptable)					
218 S MO				d2 Street Articless (1.0. Box North Control North Control					
	SSEE FL 32301			83					
IALLAINA	30EE 1 E 0200 .		i	84	City		85 Zip (Code	
				ļ	•	FL	.		
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 a	m familiar with, and accept the obligation	ons of, Section 617.0503, Flor	ida Statı	utes.		4/27/40	¥		
SIGNATUF:E Signature, type of printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS ANI.		13.	- Ago-r	orgination of the	ADDITIONS/CHANGES TO OFFICERS A	ID DIRECTO	FRS IN 12	
TITLE	PSD	☐ DELETE	1.1 TD	TLE			Change	Addition	
NAME	CARRUTHERS, SCOTT		1.2 NA	WE				1	
STREET ADDRESS	*** * ****			REET	ADDRESS			Ţ	
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CI	TY-ST	-ZIP				
TITLE	170°	DELETE	2.1 TI			DIRECTOR	Change	Addition	
NAME	LIGGIO, JEFFERY M.			2 NAME					
STREET ADDRESS	ATT OF THE PROPERTY OF THE PARTY OF THE PART				2.3 STREET ADDRESS				
CITY-ST-ZIP	WEST DALLA DEACH EL COACA			ITY-S	1			}	
TITLE	B CONTRACTOR DEADITIE SOUTH	☐ DELETE	3.1 TI			CHAIRMAN	Change	Addition	
NAME	NEAL A ROTH		3.2 N	AME					
STREET ADDRESS	PULL A BOTT				ADDRESS				
CITY-ST-ZiP	•			.A. CITY-ST-ZIP					
TITLE	CD-	DELETE	4.1 TT	_		VICE-CHAIRMAN	Change	Addition	
NAME	ROSELLI. RICHARU J	-	4. 2 N	AME		LANCE BLOCK			
STREET ADORESS	AT THE ALE ALE		4.3 ST	REET	ADDRESS	I none dans access taller Phil	D.		
CITY-ST-ZIP	700 GE THILD AVE OUTE 100			TY-ST		WEST PALIN BEACH, FL 33409			
TITLE			5.1 TI			TREASURER	Change	Addition	
NAME	PD~		5.2 N/	AME		المعامية أأم مماء			
STREET ADDRESS	NECATION, JAIMES			REET	ADDRESS				
CITY-ST-ZIP				TY-ST	-ZIP	WEST PALIN BEACH, FL 334	ЮЦ		
TITLE		☐ DELETE	6.1 TI	TLE		The state of the s	Change	Addition	
NAME			6.2 N	AME)	
			6.3 S	TREET	ADDRESS	-			
STREET ADDRESS	1					1			

14. 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 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 chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP