

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED

Sep 17 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000000087 (4)

1. Corporation Name

SPECIALTY AGENTS POLITICAL AWARENESS COMMITTEE,
INC.

Principal Place of Business

305 SPRING LAKE HILLS DRIVE
ALTAMONTE SPRINGS FL 32714

Mailing Address

305 SPRING LAKE HILLS DRIVE
ALTAMONTE SPRINGS FL 32714

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/05/1996

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEL Number

59-3350887

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81

Name

SPECIALTY AGENTS - MICHAEL V. VAUGHN

82

Street Address (P.O. Box Number is Not Acceptable)

305 Spring Lake Hills Dr.

83

City

Altamonte Springs

FL

Zip Code

32714

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 Michael Vaughn

Executive Adm.

8-28-97

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 ☐ DELETE

NAME PD
DALY, FRANK
STREET ADDRESS 305 SPRING LAKE HILLS DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE ☐ DELETE

NAME VD
FLEMING, ADRIENNE
STREET ADDRESS 305 SPRING LAKE HILLS DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE ☐ DELETE

NAME SD
LUCAS, CAREN
STREET ADDRESS 305 SPRING LAKE HILLS DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE ☐ DELETE

NAME T
JENKINS, ELI
STREET ADDRESS 305 SPRING LAKE HILLS DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

NAME D
Frank Daly
STREET ADDRESS 5387 SW. ANAHUJA AVE.
CITY-ST-ZIP Palm City FL 34990

2.1 TITLE ☒ Change ☐ Addition

NAME D
Adrienne Fleming
STREET ADDRESS 4501 N. NEBRASKA AVE.
CITY-ST-ZIP TAMPA FL 33603

3.1 TITLE ☒ Change ☐ Addition

NAME V
Caren Lucas
STREET ADDRESS 32321 Haven Ct #100
CITY-ST-ZIP Leesburg FL 34728

4.1 TITLE ☒ Change ☐ Addition

NAME T
Eli Jenkins
STREET ADDRESS 5265 Park Blvd
CITY-ST-ZIP Pinellas Park FL 34655

5.1 TITLE ☐ Change ☒ Addition

NAME P
Richard Hill
STREET ADDRESS 5211 Timoguan Rd #6
CITY-ST-ZIP Jacksonville FL 32210

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

14. I do 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 changed, or on an attachment with an address.

SIGNATURE

SIGNATURE REQUIRED

9/12/97 407-780077

CP2E037 (4/97)