2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State
04-07-2002 90048 015 ****61.25

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DOCUMENT # N98000000254

1. Entity Name

FLORIDA ASSOCIATION OF LEGAL SUPPORT SPECIALISTS INC.

Principal Place of Business	Mailing Address
13655 MCGREGOR VILLAGE DRIVE #14 FORT MYERS FL 33919	C/O TRUDIE BAKER 13655 MCGREGOR VILLAGE DR., #14 FORT MYERS FL 33919

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2062 Sun Tree Cir. N.	c/o Gayle L. Briske
Suite, Apt. #, etc.	Suite, Apt. #, etc. 2062 Sun Tree Cir. N.
City & State: Clearwater FL	City & State: Clearwater FL
Zip: 33763 Country: USA	Zip: 33763 Country: USA

4. FEI Number: 59-3489193 ☐ Applied For ☐ Not Applicable

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
COAD, BARBARA J 802 CARVELL DRIVE WINTER PARK FL 32792	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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROSE, JANE 836 SAVANNAH FALLS DR. WESTON FL 33327	☐ Delete	PD Batchelder, Susan M. PLS 6997 - 62nd Ave N. Pinellas Park FL 33781	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PED BATCHELDER, SUSAN M PLS 6997 - 62ND AVENUE NORTH PINELLAS PARK FL 33781	☐ Delete	PED Waters, Deborah L. 1630 Coquina Dr. Merritt Island FL 32952	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VOLKMAR, JENNIFER 2780 S.W. 17TH CIRCLE OCALA FL 34474	☐ Delete	VD<br~~E Jean~~ Tarman E. Jean 11105 Fairway Lane Dade City FL 33525	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KRAUSE-STEVENS, JAYNE ALS 9092 POMELO RD. W. FORT MYERS FL 33912	☐ Delete	SD Barbara Cavallero 20812 Bantams Roost Estero FL 33928	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BAKER, TRUDIE R ALS CLA 13655 MCGREGOR VILLAGE DRIVE FORT MYERS FL 33919	☐ Delete	TD Baker, Trudie R. ALS CLA 27683 Suffridge Dr. Bonita Springs FL 34135	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GODFREY, BELINDA PLS 3412 CLARK ROAD, #117 SARASOTA FL 34231	☐ Delete	D Rose Jane 836 Savannah Falls Dr Weston FL 33327	☒ Change ☐ Addition

CR2E037 (9/01)

12. 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 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: Trudie R Baker SIGNATURE REQUIRED Trudie R. Baker ALS, CLA 3-24-02 941-498-0844

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