2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N98000000254

1. Entity Name
FLORIDA ASSOCIATION OF LEGAL SUPPORT SPECIALISTS, INC.

FILED

2007 AUG 16 AM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08072007 Chg-NP CR2E037 (12/06)

Principal Place of Business	Mailing Address
2515 PEEL AVE ORLANDO, FL 32806	2515 PEEL AVE ORLANDO, FL 32806

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
20812 Bantams Roost	20812 Bantams Roost
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Estero FL	City & State: Estero FL
Zip: 33928 Country: USA	Zip: 33928 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is $61.25

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ANDERSIN, ROBERT PO BOX 782 SHALIMAR, FL 32579	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 300108749953 08/29/07--01011--015 **61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PE BARNES, JUDI S 21010 WOLF BRANCH RD MOUNT DORA, FL 32757	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP TYREE, DEBRAH 1924 LAKE ALMA DR APOPKA, FL 32712	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President - Elect ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DANCEY, ALLAN J 2515 PEEL AVE ORLANDO, FL 32806	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Barbara Cavallaro 20812 Bantams Roost Estero FL 33928 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S NOLAN, MARCY 7751 GREENLAWN DR NEW PORT RICHEY, FL 34653	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Betty McMurtry 1817 Hammerlin Ave Winter Park FL 32789 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Barbara Cavallaro Treasurer 8/13/07 239-337-7337
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Barbara Cavallaro Treasurer