

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000001824

1. Entity Name

FLORIDA ASSOCIATION OF PARALEGALS, INC.

Principal Place of Business

6949 - 113TH WAY N
SEMINOLE FL 33772

Mailing Address

6949 - 113TH WAY N
SEMINOLE FL 33772

2. Principal Place of Business

12825 Harbor View DR.

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Seminole FL

City & State

Zip

Country

33776 USA

4. FEI Number

59-3567937

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAIER, SUSAN L
6949 - 113TH WAY N
SEMINOLE FL 33772

7. Name and Address of New Registered Agent

Name TREVAL L. McDONALD

Street Address (P.O. Box Number is Not Acceptable)
12825 Harbor View Dr.

City Seminole

FL

Zip Code 33776

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

Treval L. McDonald

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

500003524585--6

-01/05/01-01024-029

*****61.25 *****61.25

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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

TITLE *President/Reg. Agt.* ☒ Delete
NAME *Susan L. Maier*
STREET ADDRESS *6949 - 113 Way N,*
CITY-ST-ZIP *Seminole, FL 33772*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE *D* ☐ Change ☒ Addition
NAME *PRESIDENT YARA B. VEGA*
STREET ADDRESS *1615 FORUM PL., STE. 3-B*
CITY-ST-ZIP *W. PALM BCH, FL 33401*

TITLE *D* ☐ Change ☒ Addition
NAME *VICE PRESIDENT JULIE J. CHANDLER*
STREET ADDRESS *5615 S. PERCH DR.*
CITY-ST-ZIP *FLORAL CITY, FL 34436*

TITLE *D* ☐ Change ☒ Addition
NAME *SECRETARY KATHY G. HARMON*
STREET ADDRESS *1615 FORUM PL., STE. 3-B*
CITY-ST-ZIP *W. PALM BEACH, FL 33401*

TITLE *D* ☒ Change ☐ Addition
NAME *TREASURER TREVAL L. McDONALD*
STREET ADDRESS *12825 HARBOR VIEW DR,*
CITY-ST-ZIP *SEMINOLE FL 33776*

TITLE ☐ Change ☐ Addition
NAME *500003524585--6*
STREET ADDRESS *-01/05/01-01024-030*
CITY-ST-ZIP ******61.25 *****61.25*

TITLE ☐ Change ☐ Addition
NAME *12/12*
STREET ADDRESS
CITY-ST-ZIP

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: *Treval L. McDonald*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/16/00 (727) 393-8351

Date Daytime Phone #

CR2E037 (5/00)

203

FLORIDA ASSOCIATION OF PARALEGALS, INC.

Board of Directors

November 14, 2000

President

Yara B. Vega
Liggio, Benrubi & Williams, P.A.
1615 Forum Place, Ste. 3-B
West Palm Beach, FL 33401
Work: (561) 616-3333
Email#1: yarilinggordo@aol.com
Email#2: yvega@liggiolaw.com

Vice President

Julie J. Chandler, RP
Paralegal On Assignment, Inc.
5615 S. Perch Dr.
Floral City, FL 34436
Work: (352) 726-5404
Email#1: jjchan@tampabay.rr.com
Email#2: jjchan@paralegalonassignment.com

Secretary

Kathy G. Harmon
Liggio, Benrubi & Williams, P.A.
1615 Forum Place, Ste. 3-B
West Palm Beach, FL 33401
Work: (561) 616-3333
Email#1: Kgharmon@webtv.net
Email#2: Kharmon@liggiolaw.com

Treasurer

Treva L. McDonald, RP
Donald W. Giffin, P.A.
7700 Seminole Blvd., Ste. One
Seminole, FL 33772
Work: (727) 393-8351
Email#1: FAPEmail@aol.com
Email#2: BchFmFla@aol.com



Florida Association of Paralegals

12825 Harbor View Dr.
Seminole, FL 33776-4323
(727) 391-5177

November 16, 2000

The Honorable Katherine Harris
State of Florida, Secretary of State
P.O. Box 6327
Tallahassee, FL 32314

**Re: Annual Report and Reinstatement of the
Florida Association of Paralegals, Inc.**

Dear Secretary Harris:

This letter is to request that you accept the enclosed 2000 Annual Report and renewal dues in the amount of \$61.56 for the Florida Association of Paralegals, Inc.

I realize that our Report is being filed late, however, I offer the following explanation for your consideration:

FAP's former Registered Agent/President, did not transmit the Annual Report to me in time for proper filing. This error was not committed with malice, however, was due to the oversight, error and omission of our former President and Registered Agent.

FAP has now appointed a new Board of Directors and Registered Agent, as reflected upon the enclosed Annual Report.

I assure you that our new Board will pay prompt attention to the guidelines and deadlines promulgated by the Florida Department of State, and that this type of error will not occur again in the future.

FAP is a small, non-profit corporation with approximately 30 members. It would pose an extreme hardship upon us to be forced to pay the sum of \$236.25 to reinstate our Corporation.

On behalf of FAP, I thank you for your kind consideration of our request.

Respectfully submitted,

Treva L. McDonald, RP, Treasurer/FAP
PACE Registered Paralegal

/tlm

cc: FAP Board of Directors

enclosed items: 50909
665 100 100 50 50

distributed to all FAP members
for their review and comment