

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

08 OCT -6 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000021908

1. Entity Name

STEWART H. LAPAYOWKER, P.A.



Principal Place of Business

2700 N. MILITARY TRAIL
SUITE 130
BOCA RATON, FL 33431

Mailing Address

2700 N. MILITARY TRAIL
SUITE 130
BOCA RATON, FL 33431

2. Principal Place of Business - No P.O. Box #

5360 N.W. 20TH TERRACE

3. Mailing Address

5360 N.W. 20TH TERRACE

Suite, Apt. #, etc.

SUITE 205

Suite, Apt. #, etc.

SUITE 205

City & State

FORT LAUDERDALE, FL

City & State

FORT LAUDERDALE, FL

Zip

33309

Country

USA

Zip

33309

Country

USA

10022008

Chg-P

CR2E034 (12/06)

4. FEI Number

20-4312243

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAPAYOWKER, STEWART H
2700 N. MILITARY TRAIL
SUITE 130
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

Name
LAPAYOWKER, STEWART H

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

5360 N.W. 20TH TERRACE

SUITE 205

City

FORT LAUDERDALE

FL

Zip Code

33309

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

Stewart H. Lapayowker
Signature, typed or printed name of registered agent and the filer, if applicable.

STEWART H. LAPAYOWKER

(NOTE: Registered Agent signature required when reinstating)

10/2/08

DATE

Amended AR is \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD
NAME LAPAYOWKER, STEWART H ☐ Delete
STREET ADDRESS 2700 N. MILITARY TRAIL #130
CITY-ST-ZIP BOCA RATON, FL 33431

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 11

TITLE PSTD ☒ Change ☐ Addition
NAME LAPAYOWKER, STEWART H
STREET ADDRESS 5360 N.W. 20TH TERRACE #205
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000136819520
CITY-ST-ZIP 10/10/08--01038--014 **61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/2/08

Date

954-202-9600

Daytime Phone #