

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30569

Entity Name: FLORIDA ACADEMY OF PROFESSIONAL MEDIATORS, INC.**FILED**
Apr 30, 2015
Secretary of State
CC6995740808**Current Principal Place of Business:**C/O STANLEY ZAMOR
7958 PINES BLVD. 235
PEMBROKE PINES, FL 33024**Current Mailing Address:**C/O STANLEY ZAMOR
P.O. BOX 812552
BOCA RATON, FL 33481-2552 US**FEI Number: 59-2939082****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ZAMOR, STANLEY
C/O STANLEY ZAMOR
7958 PINES BLVD. 235
PEMBROKE PINES, FL 33024 US*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: STANLEY ZAMOR****04/30/2015**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name ZAMOR, STANLEY
Address C/O STANLEY ZAMOR
7958 PINES BLVD. 235
City-State-Zip: PEMBROKE PINES FL 33024

Title VP
Name CIMBLER, SAUL
Address 44 WEST FLAGLER STREET
SUITE #1425
City-State-Zip: MIAMI FL 33130

Title TREASURER
Name MINER, NOEL
Address PO BOX 64
City-State-Zip: JUPITER FL 33468

Title DIRECTOR
Name WILLIAMS, LARRY
Address 20801 BISCAYNE BLVD
4TH FLOOR
City-State-Zip: MIAMI FL 33180

Title PE
Name RUSELL, KAREN
Address P.O. BOX 812522
City-State-Zip: BOCA RATON FL 33481-2552

Title SECRETARY
Name BALDWIN, DANIEL
Address 1429 DAVENPORT DRIVE
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR
Name BURKE, LEONARD
Address 5703 RED BUD LAKE RD.
346
City-State-Zip: WINTER SPRING FL 32708

Title DIRECTOR
Name DOBKIN, JOSEPH
Address 9990 SW 77TH AVE
PENTHOUSE #3
City-State-Zip: MIAMI FL 33156

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: STANLEY ZAMOR**PRESIDENT****04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SIKORSKI, JR. J.D., EDMUND
Address 1827 SW STRATFORD WAY
City-State-Zip: PALM CITY FL 34990

Title DIRECTOR
Name SUSSMAN, WILLIAM
Address P.O. BOX 565715
City-State-Zip: MIAMI FL 33256

Title DIRECTOR
Name ROMANO, RODNEY
Address 1655 PALM BEACH LAKES BLVD.
700
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name LIPP, STAN
Address 700 PARK SHORE DR.
City-State-Zip: NAPLES FL 34103