

**DBPR 0040 – Officers and Directors**

**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND  
PROFESSIONAL REGULATION**

**NOTE – This form must be submitted as part of an  
application packet**

Please provide information on the partners, managers, officers, or directors for your business entity below.

<b>ORGANIZATION NAME</b>
Name of Organization
D/B/A or Trade Name

<b>LIMITED LIABILITY CORPORATION QUESTIONS</b>
If your corporation is a limited liability corporation (LLC), is the corporation member managed or manager managed? You can check your Articles of Incorporation for this information. Member Managed <input type="checkbox"/> Manager Managed <input type="checkbox"/>

Please list below all Officers, Directors, Managers, and/or Shareholders with 10% or more interest in the business:

<b>MANAGEMENT INFORMATION</b>				
Last Name	First	Middle	Title	Suffix
Office Held	Percentage of Ownership	Active	<input type="checkbox"/>	Non-Active <input type="checkbox"/>
<b>RESIDENCE ADDRESS</b>				
Street Address or P.O. Box				
City		State	Zip Code (+4 optional)	
County (if Florida address)		Country		

<b>MANAGEMENT INFORMATION</b>				
Last Name	First	Middle	Title	Suffix
Office Held	Percentage of Ownership	Active	<input type="checkbox"/>	Non-Active <input type="checkbox"/>
<b>RESIDENCE ADDRESS</b>				
Street Address or P.O. Box				
City		State	Zip Code (+4 optional)	
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Attach additional sheets as necessary