



FLORIDA DEPARTMENT OF STATE

PUBLIC RECORDS EXEMPTION REQUEST (REV. 08/2021)

Florida law allows certain persons to request that an agency not publicly disclose specific identification and/or location information contained in any of its agency records. Please refer to sections 119.071(2)(j), (4)(d), and (5)(i), 265.605, and 267.17, Fla. Stat., or other applicable statute for scope of protection which may include home address, phone numbers, photos, name of spouse and/or children, and their place of employment, and/or school or daycare care facility, and date of birth.

To request the exemption for information contained within records of the Department of State, please complete the form and return to: Secretary of State, c/o Public Records Custodian Director, R.A. Gray Building, 500 S. Bronough St., Tallahassee, FL 32399. For more information, contact 850-245-6536.

To request the claim for exemption extend to your spouse and/or children (not applicable for donor* or victim* exemptions) please submit a separate sheet with the name, date of birth, and relationship for purposes of identifying them in any public records within the custody of the Department. (If you have attached supplemental pages check here)

In order to process this request for any of your records that may be in the Division of Corporations, please complete the Addendum for Exemption of Public Disclosure. If you do not have any records with the Division of Corporations that include exempt information please check here .

You will be contacted if the information you provide is insufficient to identify you distinctly from someone else similarly named in the records or if the information provided is insufficient to demonstrate the applicability of a public records exemption.

I attest that I am an individual covered under Section 119.071, F.S., as, check the appropriate item (only one):

- | | | |
|--|----|---|
| <input type="checkbox"/> current | or | <input type="checkbox"/> former |
| <input type="checkbox"/> spouse of a current | or | <input type="checkbox"/> spouse of a former |
| <input type="checkbox"/> child of a current | or | <input type="checkbox"/> child of a former |

and I hereby request the exemption (check applicable exemption category):

- | | |
|--|---|
| <input type="checkbox"/> Addiction treatment facility, licensed pursuant to Chapter 397, F.S., directors, managers, supervisors, nurses, and clinical employees (s. 119.071(4)(d)2.s) | <input type="checkbox"/> Dept. of Revenue personnel or local government personnel whose duties relate to revenue collection and enforcement or child support enforcement. (s. 119.071(4)(d)2.a) |
| <input type="checkbox"/> Child advocacy center, meeting the standards set forth in Chapter 39, F.S., directors, managers, supervisors, and clinical employees and members of a Child Protection Team as set forth in s. 39.303, F.S. (s. 119.071(4)(d)2.t) | <input type="checkbox"/> Domestic violence centers, certified under Chapter 39, F.S., staff and domestic violence advocates as defined in s. 90.5036(1)(b), F.S. (s. 119.071(4)(d)2.u) |
| <input type="checkbox"/> Code Enforcement Officer (s. 119.071(4)(d)2.i) | <input type="checkbox"/> Donor or prospective donor,* Cultural Endowment Program Trust Fund, Citizen Support Organizations or National, Historic Landmarks (publicly owned houses) (sections 265.605 and/or 267.17) |
| <input type="checkbox"/> County Tax Collector (s. 119.071(4)(d)2.n) | <input type="checkbox"/> Emergency medical technicians or paramedics certified under Chapter 401, F.S (s. 119.071(4)(d)2.q) |
| <input type="checkbox"/> Dept. of Business and Professional Regulation-investigators and inspectors (s. 119.071(4)(d)2.m) | <input type="checkbox"/> Firefighter certified in compliance with s. 633.408, F.S. (s. 119.071(4)(d)2.d) |
| <input type="checkbox"/> Dept. of Children and Family Services personnel whose duties involve investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities (s. 119.071(4)(d)2.a) | <input type="checkbox"/> Guardian ad litem (s. 119.071(4)(d)2.j) |
| <input type="checkbox"/> Dept. of Financial Services investigative personnel whose duties include the investigation of fraud, theft, workers' compensation coverage requirements and compliance, other related criminal activities, or state regulatory requirement violations (s. 119.071(4)(d)2.b) | <input type="checkbox"/> Human resource, labor relations, or employee relations director, assistant director, manager or assistant manager of any local government agency or water management district (s. 119.071(4)(d)2.h) |
| <input type="checkbox"/> Dept. of Health personnel whose duties support the investigations of child abuse or neglect, determination of benefits, or the investigation, inspection, or prosecution of health care practitioners (s. 119.071(4)(d)2.a) | <input type="checkbox"/> Impaired practitioner consultants whose duties result in a determination of a person's skill and safety to practice a licensed profession (s. 119.071(4)(d)2.p) |
| <input type="checkbox"/> Dept. of Health personnel whose duties include, or result in, the determination or adjudication of eligibility for social security disability benefits, the investigation or prosecution of complaints filed against health care practitioners, or the inspection of health care practitioners or health care facilities licensed by the Department of Health (s. 119.071(4)(d)2.e) | <input type="checkbox"/> Inspector general employees or internal audit department employees whose duties include auditing or investigating waste, fraud, abuse, theft, exploitation, or other activities that could lead to criminal prosecution or administrative discipline (s. 119.071(4)(d)2.r) |
| | <input type="checkbox"/> Judge - district court of appeal, circuit court and county court, or justice of the Florida Supreme Court (s. 119.071(4)(d)2.e) |

Judicial or quasi-judicial officer (general and special magistrate, judge of compensation claims, administrative law judge of the Division of Administrative Hearings, and child support enforcement hearing officer) (s. 119.071(4)(d)2.g)

Juvenile probation officer, juvenile probation supervisor, detention superintendent, assistant detention superintendent, senior juvenile detention officer, juvenile detention officer supervisor, juvenile detention officer, house parent I and II, house parent supervisor, group treatment leader, group treatment leader supervisor, rehabilitation therapist, and social services counselor of the Dept. of Juvenile Justice (s. 119.071(4)(d)2.k)

Law enforcement personnel including correctional officers and correctional probation officers (s. 119.071(4)(d)2.a)

Office of Financial Regulation, Bureau of Financial Investigations, investigative personnel whose duties include the investigation of fraud, theft, other related criminal activities, or state regulatory requirement violations (s. 119.071(4)(d)2.c.)

Prosecutor (state attorney, assistant state attorney, statewide prosecutor, assistant statewide prosecutor) (s. 119.071(4)(d)2.f)

Public defenders and criminal conflict and civil regional counsel (includes assistant public defenders, assistant criminal conflict and assistant civil regional counsel) (s. 119.071(4)(d)2.l)

U.S. attorney or assistant attorney, U.S. appellate judge, U.S. district court judge and U.S. magistrate (By signature below, person certifies that reasonable efforts made to protect information from being publicly accessible by other means) (S. 119.071(5)(i))

Victim* of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence [Attach official verification that crime occurred. 5-year exemption. Contact Attorney General's Office (850-414-3990) about eligibility for separate Address Confidentiality Program. See s. 741.465, Fla. Stat]

Other (list applicable statute): _____

Printed Name: _____ Date of Birth: _____ Phone Number: _____

Home Address: _____

Signature: _____ Date: _____

Pursuant to Section 119.071(4)(d)3., F.S., your request must be notarized. The requestor hereby swears or affirms, under penalty of perjury, that the information contained in the foregoing public record exemption form is true and correct.

REQUIRED NOTARIZATION SECTION

STATE OF FLORIDA

COUNTY OF _____

The foregoing Public Records Exemption Request was sworn to (or affirmed) and subscribed before me by means of

physical presence or online notarization, this _____ day of _____, 20_____, by

_____, who is:

_____ personally known to me OR

_____ produced the following identification: _____

Signature of Notary Public - State of Florida

Print, Type, or Stamp Commissioned Name of Notary Public

**ADDENDUM FOR EXEMPTION OF PUBLIC DISCLOSURE
ONLY FOR DIVISION OF CORPORATIONS RECORDS**

Before the Florida Department of State, Division of Corporations can act on your request it needs the following additional information from you:

1. Complete home address that is to be redacted:

2.

Are you now or have you ever been listed on the Division of Corporations' records as:
 - a. an officer or director of a corporation? Yes No
 - b. a managing member or manager of a limited liability company? Yes No
 - c. a general partner in a limited partnership? Yes No
 - d. an owner of a fictitious name? Yes No
 - e. a partner in a general partnership? Yes No
 - f. a notary? Yes No
 - g. an owner of a trademark registration Yes No

3. Have you ever had a judgment lien filed against you that would have been filed in this office after October 1, 2001 Yes No

If you answered "Yes" to one or more of the questions, and the address to be redacted is the **Registered Agent address** you will need to provide the name of the entity, registration or filing and an **alternate Florida street address that can replace the one we currently have in our records**. We cannot have a record with a missing Registered Agent address.

If the address to be redacted is the **principal place of business address for a corporation, limited liability company, or limited partnership** you will need to provide the name of the entity, registration or filing and an **alternate street address that can replace the one we currently have in our records**. We cannot have a record with a missing principal place of business for these entities.

Name/Names of entity or registration:

Alternate address to replace the one current on our records. Must be a Florida street address for replacing a redacted registered agent address. Must be a street address for replacing a redacted principal place of business for a corporate entity:

Please return this addendum with the **Public Records Exemption Request** form.
For questions concerning this addendum, call 850-245-6536.