

FLORIDA DEPARTMENT OF STATE

PUBLIC RECORDS EXEMPTION REQUEST (REV. 08/2024)

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 <u>may</u> 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 \square)

If you have any records with the **Division of Corporations** that include exempt information please check here **D** and complete the Addendum for Exemption of Public Disclosure. Otherwise, there is no need to complete the Addendum for Exemption of Public Disclosure.

You will **only** 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):

current	or	former			
spouse of a current	or	spouse of a former			
child of a current	or	child of a former			
and I hereby request the exemption (check applicable exemption category):					
Addiction treatment facility, licensed pursuant to Chapter 397, F.S., directors, managers, supervisors, nurses, and clinical employees (s. $119.071(4)(d)2.s$)		Dept. of Revenue personnel or local government personnel whose duties relate to revenue collection and enforcement or child support enforcement. (s. $119.071(4)(d)2.a)$			
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)		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. $119.071(4)(d)2.u)$			
Code Enforcement Officer (s. 119.071(4)(d)2.i)		Emergency medical technicians or paramedics certified under Chapter 401, F.S (s. $119.071(4)(d)2.q)$			
County Tax Collector (s. 119.071(4)(d)2.n)		Firefighter certified in compliance with s. 633.408, F.S. (s. 119.071(4)(d)2.d)			
Dept. of Agriculture and Consumer Services inspectors and investigators (s. 119.071(4)(d)2.v.)		Guardian ad litem (s. 119.071(4)(d)2.j)			
Dept. of Business and Professional Regulation-investigators and inspectors (s. 119.071(4)(d)2.m) Dept. of Children and Family Services personnel whose duties		Human resource, labor relations, or employee relations director, assistant director, manager or assistant manager of any local government agency or water management district (s. $119.071(4)(d)2.h$)			
involve investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities (s. 119.071(4)(d)2.a) Dept. of Financial Services investigative personnel whose duties include the investigation of fraud, theft, workers' compensation		Impaired practitioner consultants whose duties result in a determination of a person's skill and safety to practice a licensed profession (s. $119.071(4)(d)2.p$)			
coverage requirements and compliance, other related criminal activities, or state regulatory requirement violations (s. 119.071(4)(d)2.b)		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)			
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. $119.071(4)(d)2.a$)		Judge - district court of appeal, circuit court and county court, or justice of the Florida Supreme Court (s. $119.071(4)(d)2.e)$			
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. $119.071(4)(d)2.0$)		Current judicial assistant (court employee assigned to the following class codes: 8140, 8150, 8310, and 8320) (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 effects) ($a_{110} O(21(4)(4)2)$			

hearing officer) (s. 119.071(4)(d)2.g)

y, that the information contained in the foregoing pu REQUIRED N E OF FLORIDA TY OF regoing Public Records Exemption Request was ical presence or \Box online notarization, this	OTARIZATI	ption form is true and correct.
REQUIRED N COFFLORIDA TY OF regoing Public Records Exemption Request was	OTARIZATI s sworn to (or af	Tirmed) and subscribed before me by means of
E OF FLORIDA		ption form is true and correct.
REQUIRED N		ption form is true and correct.
		ption form is true and correct.
y, that the information contained in the foregoing pu	blic record exem	ption form is true and correct.
ant to Section 119.071(4)(d)3., F.S., your request mu	st be notarized.	
ıre:		Date:
Address:		
Name: I	Date of Birth:	Phone Number:
Commissioner of the Florida Gaming Control Commission (s. 119.071(4)(d)2.x)		Other (must list applicable statute
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)2.1)		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 (850-414-3300) about eligibility for separate Address Confidentiality Program.] See s. 741.465, Fla. Stat]
		authorized to access information that is deemed "secret" or "top secret" by the Federal Government or who is a servicemember of a special operations force (s. 119.071(5)(k))
Investigations, investigative personnel whose duties include the investigation of fraud, theft, other related criminal activities, or		Current clerk of circuit court, deputy clerk of circuit court, or clerk of circuit court personnel (s. 119.071(4)(d)2.y) Person employed by the United States Department of Defense who is
Law enforcement personnel including correctional officers and correctional probation officers (s. 119.071(4)(d)2.a)		attorney, city attorney, assistant city attorney, or deputy city attorney (s. 119.071(4)(d)2.w)
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		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) Current county attorney, assistant county attorney, deputy county
	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.x) Name: I Address: I	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)2.1) Commissioner of the Florida Gaming Control Commission (s. 119.071(4)(d)2.x) Name:

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 to be redacted:
2. Are you now or have you ever been listed on the Division of Corporations' records as a Registered Agent?
Yes No
If you answered "Yes" to this question and the address to be redacted is the Registered Agent address, you must provide an alternate Florida Street Address that can replace the one we currently have in our records.
3. Is your home address the principal place of business address for a corporation, limited liability company, or limited partnership, for which you wish to have redacted?
\Box Yes \Box No
If you answered "Yes" to this question and the address to be redacted is the principal place of business address for a corporation, limited liability company, or limited partnership , you must provide an alternate Street Address that can replace the one we currently have in our records.
4. Are you now or have you ever been listed on the Division of Corporations records as:
 a. An officer or director of a corporation? b. A managing member or manager of a limited liability company? c. A general partner in a limited partnership? d. An owner of a fictitious name? e. A partner in a general partnership? f. A notary? g. An owner of a trademark registration? Yes No Yes No Yes No Yes No Yes No Yes No
If you answered "Yes" to one or more of the above questions, you must provide an alternative address to replace the one we currently have in our records. This address may be a P.O. Box; however, if the address being replaced is for a Registered Agent or a principal place of business, please see numbers 2 or 3 above or call the Division of Corporations at 850-245-6999 for further information.
5. Have you ever had a judgment lien filed against you that would have been filed in this office after October 1, 2001?
\Box Yes \Box No
Name/Names of entity, registration, or notary. Please provide corporate document number or, if applicable, your Notary ID number, if known:
Alternate address to replace the one current on our records. See requirements listed above.