

Exhibit "B"

**CERTIFIED PROCESS SERVER RENEWAL APPLICATION  
NINETEENTH JUDICIAL CIRCUIT**

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Number and Street/P.O. Box  
\_\_\_\_\_  
City, State, Zip Code

Residence Address If Different From Mailing Address Above:  
\_\_\_\_\_  
Number and Street  
\_\_\_\_\_  
City, State, Zip Code

Telephone(s): \_\_\_\_\_

E-mail(s): \_\_\_\_\_

Business Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
Number and Street  
\_\_\_\_\_  
City, State, Zip Code

Business Telephone(s): \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Race: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_

Have you ever been arrested for any crime, including criminal traffic violations?

Yes \_\_\_\_\_ No \_\_\_\_\_

If you answered yes, attach a statement detailing the facts of the arrest(s) and disposition(s).

List all counties in which you are certified to serve process and the date(s) of expiration of certification(s).

County

Date Certification Expires

Under the provisions of section 92.525, Florida Statutes, under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true. I further understand that any misinformation supplied herein shall result in an immediate forfeiture of any opportunity to become or remain a certified process server in the Nineteenth Judicial Circuit.

\_\_\_\_\_  
Signature of Certified Process Server

\_\_\_\_\_  
Date

**DO NOT WRITE BELOW THIS LINE – FOR OFFICIAL USE ONLY**

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ID No: \_\_\_\_\_ Issued: \_\_\_\_\_ Renewal Date: \_\_\_\_\_

Last Education/Training: \_\_\_\_\_