


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 765095
 1. Entity Name
 POLICE RESERVE ASSOCIATION OF FLORIDA, INC.



Principal Place of Business: 3348 NORTHBROOKE LANE, TALLAHASSEE, FL 32309
 Mailing Address: 3348 NORTHBROOKE LANE, TALLAHASSEE, FL 32309

FILED
 08 JUL 31 PM 1:49

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



04212008 No Chg-NP CR2E037 (4/06)

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4. FEI Number: 59-2761105 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CHIPLEY, JOHN A
 3348 NORTHBROOKE LANE
 TALLAHASSEE, FL 32309

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when registering) DATE: _____

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CHIPLEY, JOHN A
STREET ADDRESS	3348 NORTHBROOKE LANE
CITY-ST-ZIP	TALLAHASSEE, FL 32309
TITLE	VD
NAME	PIRSON, DONALD S
STREET ADDRESS	3066 TEMPLE LANE N.
CITY-ST-ZIP	ROCKLEDGE, FL 32955
TITLE	SD
NAME	MILTON, JONATHAN W
STREET ADDRESS	3808 S.E. LOWER ST.
CITY-ST-ZIP	STUART, FL 34997
TITLE	TD
NAME	HALL, FRED
STREET ADDRESS	125 MCIVER LANE
CITY-ST-ZIP	ROCKLEDGE, FL 32955
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE: John A. Chipley JOHN A. CHIPLEY 4-21-08 850-980-4753
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #