

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2004 8:00 am
Secretary of State

02-18-2004 90020 040 ****70.00

DOCUMENT # 768824 1. Entity Name THE PASCO COUNTY SECURITY PATROL ASSOCIATION, INC.					
Principal Place of Business 8015 LOTUS DRIVE PORT RICHEY FL 34668 US			Mailing Address 8015 LOTUS DRIVE PORT RICHEY FL 34668 US		
2. Principal Place of Business 1842 TAMPA BAY DR Suite, Apt. #, etc. WESLEY CHAPEL		3. Mailing Address 1842 TAMPA BAY DR Suite, Apt. #, etc. WESLEY CHAPEL FL.			
City & State FLORIDA		City & State WESLEY CHAPEL FL.		4. FEI Number 59-2877014	
Zip 33543-5316		Country PASCO		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PURKES, DONALD R 8015 LOTUS DRIVE PORT RICHEY FL 34668			7. Name and Address of New Registered Agent Name GERALD W. COOPER Street Address (P.O. Box Number is Not Acceptable) 1842 TAMPA BAY DR. City WESLEY CHAPEL FL 33543		
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 GERALD W. COOPER PRESIDENT FEB 11 2004 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PURKES, DONALD R 8015 LOTUS DRIVE PORT RICHEY FL 34668	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CAMERON, CRAIG G 3712 EAGLE DR 34639 LAND O' LAKES FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HAUEE, GAIL 9816 LAKESIDE LANE PORT RICHEY FL 34668	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR GLEN PATTERSON 7305 BRENTWOOD DR. PORT RICHEY FL 34668		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WEST, MILDRED A 5202 RUBBER TREE CIRCLE NEW PORT RICHEY FL 34653	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RON ALDRICH 9704 60 ST. HUDSON FL 34669 DIRECTOR		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOPER, G W 1842 TAMPA BAY WESLEY CHAPEL FL 33543-5316	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT COOPER G.W. 1842 TAMPA BAY DR WESLEY CHAPEL FL 33543		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LANTZ, BARBARA 10925 ROSSITER AVE HUDSON FL 34667	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR LANTZ, BARBARA 10925 ROSSITER AVE HUDSON FL 34667		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSKOWITZ, ARTHUR 28538 TWINBROOK LANE WESLEY CHAPEL FL 33543	TITLE NAME STREET ADDRESS CITY-ST-ZIP	GLEN SHANKS 12816 FIFTH ISLE NO. HUDSON FL 34667 DIRECTOR		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 like empowered.					
SIGNATURE: G.W. COOPER PRESIDENT 2-11-04 813-973-1041 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					