

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Sep 08, 2010  
Secretary of State**

DOCUMENT# N26599

**Entity Name:** FLORIDA LAW ENFORCEMENT PROPERTY RECOVERY UNIT, INC.**Current Principal Place of Business:**1300 FIRST AVENUE NORTH  
ST PETERSBURG, FL 33705**New Principal Place of Business:****Current Mailing Address:**PO BOX 613  
EAGLE LAKE, FL 33839**New Mailing Address:**

FEI Number: 59-2888218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**PERRY, MITZI  
1300 FIRST AVENUE NORTH  
ST PETERSBURG POLICE DEPARTMENT  
ST PETERSBURG, FL 33705 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: VD  
Name: VEAZY, KIRK  
Address: PO BOX 613  
City-St-Zip: EAGLE LAKE, FL 33839Title: PD  
Name: PERRY, MITZI  
Address: PO BOX 613  
City-St-Zip: EAGLE LAKE, FL 33839Title: TD  
Name: SIRERA, CATHERINE  
Address: PO BOX 613  
City-St-Zip: EAGLE LAKE, FL 33839Title: SD  
Name: GRAVITT, KYRA  
Address: PO BOX 613  
City-St-Zip: EAGLE LAKE, FL 33839Title: VD  
Name: POLLOCK, GREG  
Address: PO BOX 613  
City-St-Zip: EAGLE LAKE, FL 33839

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CATHERINE A SIRERA

TD

09/08/2010

Electronic Signature of Signing Officer or Director

Date