

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26599

FILED
Feb 15, 2011
Secretary of State

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:

PO BOX 1692
HIGHLAND CITY, FL 33846

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 1692
City-St-Zip: HIGHLAND CITY, FL 33846

Title: PD
Name: PERRY, MITZI
Address: PO BOX 1692
City-St-Zip: HIGHLAND CITY, FL 33846

Title: TD
Name: GOLDEN, CATHERINE
Address: PO BOX 1692
City-St-Zip: HIGHLAND CITY, FL 33846

Title: SD
Name: GRAVITT, KYRA
Address: PO BOX 1692
City-St-Zip: HIGHLAND CITY, FL 33846

Title: VD
Name: POLLOCK, GREG
Address: PO BOX 1692
City-St-Zip: HIGHLAND CITY, FL 33846

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 GOLDEN

TD

02/15/2011

Electronic Signature of Signing Officer or Director

Date