

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91776 049 ****61.25

DOCUMENT # N30694

1. Entity Name

AMERICAN ASSOCIATION OF STATE TROOPERS, INC.

Principal Place of Business

1949 RAYMOND DIEHL ROAD
 TALLAHASSEE FL 32308-3778
 US

Mailing Address

1949 RAYMOND DIEHL ROAD
 TALLAHASSEE FL 32308-3778
 US

DU118431



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2952895

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COX, J. ALAN
1660 METROPOLITAN CIRCLE
TALLAHASSEE FL 32308

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	YORK, W. WAYNE	14825 EHLEN ROAD, NE	AURORA OR 97002	<input type="checkbox"/>
VPD	CLAY, ROBERT	PO BOX 243 N/A	REEDSVILLE WV 26547	<input type="checkbox"/>
VPD	JOHNSON, CLAUDE	PO BOX 209 N/A	MEMPHIS TN 38101	<input type="checkbox"/>
VPD	WITT DAVID L	14605 ROCK CREEK RD	SHERIDAN OR 97378	<input type="checkbox"/>
TD	GOLLINS, JIM	44344 MARION OAKS DR	TUSCALOOSA AL 35405	<input checked="" type="checkbox"/>
S	GAGER, KEN	1629 EVERGREEN DRIVE	CARSON CITY NV 89703	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Treasurer	Tommy Moore	6965 Summit Place	Milton, FL 32570	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secretary	Odie Hitt	4030 Meadowdale Road	Flint, TX 75762	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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: W. Wayne York **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/02

Date

Daytime Phone #

CRE037 (9/01)