

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30694

FILED
Mar 15, 2012
Secretary of State

Entity Name: AMERICAN ASSOCIATION OF STATE TROOPERS, INC.

Current Principal Place of Business:

1949 RAYMOND DIEHL ROAD
TALLAHASSEE, FL 323083778 US

New Principal Place of Business:

Current Mailing Address:

1949 RAYMOND DIEHL ROAD
TALLAHASSEE, FL 323083778 US

New Mailing Address:

FEI Number: 59-2952895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, J. ALAN
1660 METROPOLITAN CIRCLE
TALLAHASSEE, FL 32308 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: P
Name: BARBIER, KEITH
Address: 1949 RAYMOND DIEHL ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: VPD
Name: LANE, JEFFREY
Address: 1949 RAYMOND DIEHL ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: VPD
Name: RICKS, CHRISTIAN
Address: 1949 RAYMOND DIEHL ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: VPD
Name: JOHNSON, CLAUDE I
Address: 1949 RAYMOND DIEHL ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: T
Name: JOHNSON, JAMES D
Address: 1949 RAYMOND DIEHL ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: S
Name: MUSICK, KENNETH
Address: 1949 RAYMOND DIEHL ROAD
City-St-Zip: TALLAHASSEE, FL 32308

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: JOAN M BREEDING

ADMI

03/15/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date