

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000000669 (1)

1. Corporation Name

INTERNATIONAL ASSOCIATION OF LAW ENFORCEMENT INTELLIGENCE ANALYSTS, INC.



Principal Place of Business: 8401 NORTHWEST 53RD TERRACE SUITE 200 MIAMI FL 33166
Mailing Address: P.O. BOX 52-2924 MIAMI FL 33152-2924

3. Date Incorporated or Qualified: 02/04/1994
3a. Date of Last Report: 03/02/1995

2. Principal Place of Business (21-24)
2a. Mailing Address (25-30)
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country

4. FEI Number: 52-1211212
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
MAUZ, JOSEPH R
8401 NORTHWEST 53RD TERRACE
SUITE 200
MIAMI FL 33166

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13.
TITLE	P	1.1 TITLE
NAME	FERN, EMMA E	1.2 NAME
STREET ADDRESS	1365 NW 192ND TERR	1.3 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL 33169	1.4 CITY-ST-ZIP
TITLE	V	2.1 TITLE
NAME	PETERSON, MARILYN B	2.2 NAME
STREET ADDRESS	73 GORDON AVE	2.3 STREET ADDRESS
CITY-ST-ZIP	LAWRENCEVILLE NJ 08648	2.4 CITY-ST-ZIP
TITLE	S	3.1 TITLE
NAME	RAWLS, LUCYNTHIA	3.2 NAME
STREET ADDRESS	6032 CLEAR SPRINGS RD	3.3 STREET ADDRESS
CITY-ST-ZIP	VIRGINIA BEACH VA 23464	3.4 CITY-ST-ZIP
TITLE	T	4.1 TITLE
NAME	MCCARTHY, MARY	4.2 NAME
STREET ADDRESS	2001 MARINA DRIVE UNIT #205-W	4.3 STREET ADDRESS
CITY-ST-ZIP	QUINCY MA 02171	4.4 CITY-ST-ZIP
TITLE		5.1 TITLE
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE		6.1 TITLE
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: PRESIDENT/DIRECTOR (D) Change Addition
1.2 NAME: MARILYN B. PETERSON
1.3 STREET ADDRESS: 73 GORDON AVENUE
1.4 CITY-ST-ZIP: LAWRENCEVILLE, NJ 08648

2.1 TITLE: VICE PRESIDENT/TRUSTEE (T) Change Addition
2.2 NAME: MARY ANN FRENCH
2.3 STREET ADDRESS: 16320 NORTHWEST 2ND AVE
2.4 CITY-ST-ZIP: MIAMI, FLORIDA 33169

3.1 TITLE: TREASURER/TRUSTEE (T) Change Addition
3.2 NAME: MAUREEN HOLLINGER
3.3 STREET ADDRESS: 16320 NORTHWEST 2ND AVE
3.4 CITY-ST-ZIP: MIAMI, FLORIDA 33169

4.1 TITLE:
4.2 NAME:
4.3 STREET ADDRESS: 5.00001778575
4.4 CITY-ST-ZIP: 04/12/96-01061-003
5.1 TITLE: ***61.25
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY-ST-ZIP:
6.1 TITLE:
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY-ST-ZIP:
4-12-96 SR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary V. McCarthy, Treasurer, IALEIA, Inc. 1/31/96 617-472-7208
Date Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)