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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

## DOCUMENT # N9400000669 (1) 1. Corporation Name

INTERNATIONAL ASSOCIATION OF LAW ENFORCEMENT INT ELLIGENCE ANALYSTS, INC.

INTERNATIONAL ASSOCIATION OF LAW ENFORCEMENT INTELLIGENCE ANALYSTS, INC.					1 18 18 18 18 18 18 18 18 18 18 18 18 18		
rincipal Place of	f Business	Mailing Address					
	ST 53RD TERRACE	P.O. BOX 52-2924			1		
SUITE 200	3) SOUD TERRINGE	MIAMI FL 33152-2924					
MIAMI FL 33166					3. Date Incorporated or Qualified	3a. Date of	Last Report <b>2/1995</b>
					02/04/1994	03/0/	
. Principal Plac	ne of Business	2a. Mailing Address	<u> </u>		4. FEI Number . 52-1211212		Applied For Not Applicable
1		26			32 12 112 12	<b>e</b> s	3.75 Additional
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	7 1 7	Fee Required
		27			6. Election Campaign Financing	\$	5.00 May Be
City & State		City & State			Trust Fund Contribution		Added to Fees
l		<b>Zip</b>	Country	/	This corporation has liability for i	ntangible tax und	der s. 199.032,
Zip	Country	29	30	•	Florida Statutes	_ Yes ∐ No	
<u> </u>	9. Name and Address of Curre				10. Name and Address of New R	egistered Ager	nt
	2. Hanto and Address S. Conte		81	Name			
146117 10	OCEDIA D		82	Street Add	dress (P.O. Box Number is Not Acceptab	le)	
MAUZ, JO	RTHWEST 53RD TERRACE		02	J.: 350 . 100			
SUITE 200			83	3			
SUITE ZU			84	1 City		- 8	5 Zip Code
			1 -	1 - 2	poration submits this statement for the pubard of directors. I hereby accept the app	FL "	1
tamiliar witi	n, and accept the obligations of so-		NOTE: Registered Ag		the expetition	DATE	
signature _	n, and accept the obligations of, occursions, specially stated age.			ent signature requ	ured when reinstalling)  ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIF	
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TAMMERY WITE  SIGNATURE _  11.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP	Signature, typec or printed name of registered age OFFICERS A P FERN, EMMA E 1365 NW 192ND TERR MIAMI FL 33169 V PETERSON, MARILYN B 73 GORDON AVE LAWRENCEVILLE NJ 08648 S RAWLS, LUCYNTHIA 6032 CLEAR SPRINGS RD VIRGINIA BEACH VA 23464 T MCCARTHY, MARY 2001 MARINA DRIVE UNIT QUINCY MA 02171	DELETE  #205-W	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRI 4.1 TITLE 4.2 NAMI 4.3 STRI 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRI 5.4 CITY 6.1 TITLE 6.2 NAMI 6.3 NAMI 6.	E ET ADDRESS 4 Y-ST-ZIP 4 E EET ADDRESS 4 Y-ST-ZIP 5 E E E ADDRESS 4 Y-ST-ZIP 6 E E E ADDRESS 7 E E E E E E E E E E E E E E E E E E E	ADDITIONS CHANGES TO OFF PRESIDENT   DIRECTOR MARILYN B PETERS ON 73 GORDON AVENUE LAWRENCE VILLE, NJ OS VILLE TRESIDENT   TRUSTER MARY AINN FRENCH 16320 NORTHWEST 2ND MIAMI, FLORIDA 33169 TREASURER   TRUSTEE MAUREEN HOLLINGER 16320 NORTHWEST 2ND MIAMI, FLORIDA 3316	DATE FICE RS AND DIF  (D) 0  (Y) 8  (T) 0  (AUE  )  (D) 0	hange Addition  Change Addition  Change Addition  Change Addition

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 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 certify 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: SIGNATURE: MANY I ALEIA, June.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

MAIN V. MCCARTHY

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