

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002703

FILED  
Jan 30, 2007  
Secretary of State

**Entity Name:** THE FLORIDA CRIMINAL JUSTICE EXECUTIVE INSTITUTE ASSOCIATES, INC.

**Current Principal Place of Business:**

3548 TRILLIUM COURT  
TALLAHASSEE, FL 32312 US

**New Principal Place of Business:**

**Current Mailing Address:**

3548 TRILLIUM COURT  
TALLAHASSEE, FL 32312 US

**New Mailing Address:**

FEI Number: 65-0593595      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEPHENS, RICHARD L  
3548 TRILLIUM COURT  
TALLAHASSEE, FL 32312 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: PD ( ) Delete  
Name: WILLIAMS, MELVIN L  
Address: 100 JOHN GLENN BOULEVARD  
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete  
Name: PROCTOR, JOHN A  
Address: 234 E. 7TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: ST ( ) Delete  
Name: STEPHENS, RICHARD L  
Address: 3548 TRILLIUM COURT  
City-St-Zip: TALLAHASSEE, FL 32312

Title: VD ( ) Delete  
Name: SHARKEY, MARTIN A  
Address: 501 BAY ISLES ROAD  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VD ( ) Delete  
Name: WITHROW, JOHN D  
Address: 4202 E. FOWLER AVE  
City-St-Zip: TAMPA, FL 33620

Title: VD ( ) Delete  
Name: BERGHOLM, KARIN  
Address: 3900 COMMONWEALTH BLVD, MS 675  
City-St-Zip: TALLAHASSEE, FL 32399

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD L. STEPHENS

ST

01/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date