

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 06, 2004
Secretary of State**

DOCUMENT# N97000001574

Entity Name: THE FLORIDA HIGHWAY PATROL AUXILIARY FOUNDATION, INC.

Current Principal Place of Business:

2900 APALACHEE PARKWAY, ROOM A315
TALLAHASSEE, FL 32399

New Principal Place of Business:

12277 AREACA DRIVE
WELLINGTON, FL 32414

Current Mailing Address:

2900 APALACHEE PARKWAY, ROOM A315
TALLAHASSEE, FL 32399

New Mailing Address:

12277 AREACA DRIVE
WELLINGTON, FL 33414

FEI Number: 59-3495705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEROLD, LESLIE C LT
2900 APALACHEE PKWY, RM B333 M5-51
TALLAHASSEE, FL 32399 US

Name and Address of New Registered Agent:

GUIDRY, KEVIN CHIEF
2900 APALACHEE PKWY, RM B333 M5-51
TALLAHASSEE, FL 32399 US

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: CHIEF KEVIN GUIDRY FHP 07/06/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHEFFER, STEVEN A
Address: 4332 KINCARDINE DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: TORRES, RALPH
Address: 12277 AREACA DR
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: DICKERSON, CARROLL W
Address: 1551 E INTERNATIONAL SPEEDWAY BLVD
City-St-Zip: DELAND, FL 32724

Title: D () Delete
Name: COLEY, DAVID A
Address: 5130 PRESIDENTS CIRCLE
City-St-Zip: MARIANNA, FL 32446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHEFFER, STEVEN A PRES
Address: 4332 KINCARDINE DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: D (X) Change () Addition
Name: TORRES, RALPH K VP/CFO
Address: 12277 AREACA DR
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Change () Addition
Name: BARBER, DANNY VP
Address: 8624 GREEN CAY
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D (X) Change () Addition
Name: COLEY, DAVID A VP
Address: 5130 PRESIDENTS CIRCLE
City-St-Zip: MARIANNA, FL 32446

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RALPH K TORRES CFO 07/06/2004
Electronic Signature of Signing Officer or Director Date