

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001574

FILED  
Jan 11, 2007  
Secretary of State

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

**Current Principal Place of Business:**

2900 APALACHEE PARKWAY  
MS45  
TALLAHASSEE, FL 32399

**New Principal Place of Business:**

**Current Mailing Address:**

12277 AREACA DRIVE  
WELLINGTON, FL 33414

**New Mailing Address:**

FEI Number: 59-3495705

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HOWES, KEN LTC  
2900 APALACHEE PKWY,  
MS45  
TALLAHASSEE,, FL 32399 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: D ( ) Delete  
Name: SHEFFER, STEVEN A PRES  
Address: 4332 KINCARDINE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32257

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

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

Title: D ( ) Delete  
Name: WARRICK, GEORGE P D  
Address: 4360 PETERS ROAD  
City-St-Zip: FT. LAUDERDALE, FL 33317

**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:

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: RALPH TORRES

DCFO

01/11/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date