

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 21, 2009  
Secretary of State**

DOCUMENT# N98000000425

Entity Name: INTERNATIONAL POLICE ASSOCIATION, REGION 39, INC.

**Current Principal Place of Business:**

4314 HAMMERSMITH DR  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

4314 HAMMERSMITH DR  
CLERMONT, FL 34711

**New Mailing Address:**

FEI Number: 59-3129798      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BROWN, BRUCE G  
4314 HAMMERSMITH DR  
CLERMONT, FL 34711      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: P      ( ) Delete  
Name: KICEINA, LARRY  
Address: 2206 CAXTON AVE  
City-St-Zip: CLERMONT, FL 34711

Title: VP      ( ) Delete  
Name: KNAB, ROYAL 1ST  
Address: 612 LAKE SPUR LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S      ( ) Delete  
Name: BROWN, BRUCE G  
Address: 4314 HAMMERSMITH DR  
City-St-Zip: CLERMONT, FL 34711

Title: T      ( ) Delete  
Name: HART, JOE  
Address: 249 SECRET WAY  
City-St-Zip: CASSELBERRY, FL 32707

Title: VP      ( ) Delete  
Name: NABET, JOHN  
Address: 17146 SE 117 CIRCLE  
City-St-Zip: SUMMERFIELD, FL 34491

Title: VP      (X) Delete  
Name: OSTLER, RICHARD  
Address: 1050 NAVEL ORANGE DRIVE, N12  
City-St-Zip: ORANGE CITY, FL 32763

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

Title: P      (X) Change ( ) Addition  
Name: OSTLER, RICHARD  
Address: 915 DOYLE RD., APT 310  
City-St-Zip: DELTONA, FL 32725

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 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: BRUCE G BROWN

S

02/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date