

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000425

FILED  
Jan 05, 2012  
Secretary of State

**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  
Name: NABET, JOHN  
Address: 17146 SE 117TH CIRCLE  
City-St-Zip: SUMMERFIELD, FL 34491

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

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

Title: T  
Name: ODELL, TOM  
Address: 157 NEEDLEWOOD LOOP  
City-St-Zip: DEBARY, FL 32713

Title: 2 VP  
Name: ROBERTS, JOANN  
Address: 9085 ST. ANDREWS WAY  
City-St-Zip: MT. DORA, FL 32757

Title: 3 VP  
Name: KUHN, HENRY  
Address: 20546 QUEEN ALEXANDRA DR.  
City-St-Zip: LEESBURG, FL 34747

I hereby 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 all other like empowered.

SIGNATURE: BRUCE G. BROWN

S

01/05/2012

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

\_\_\_\_\_  
Date