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: BRANDON HEGELE

Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent:

HEGELE, BRANDON 16303 69TH STREET NORTH LOXAHATCHEE, FL 33470 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 | E: BRANDON S. HEGELE | | | 05/15/2016 |
|---------------------------|--|-----------------|-------------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | Р | Title | DT | |
| Name | CROWLEY, PHIL | Name | HEGELE, BRANDON S | |
| Address | 16303 69TH STREET NORTH | Address | 16303 69TH STREET NORTH | |
| City-State-Zip: | LOXAHATCHEE FL 33470 | City-State-Zip: | LOXAHATCHEE FL 33470 | |
| Title | D | Title | D | |
| Name | BRADFORD, COMMADORE | Name | HACK, BRYAN | |
| Address | 16303 69TH STREET NORTH | Address | 16303 69TH STREET NORTH | |
| City-State-Zip: | LOXAHATCHEE FL 33470 | City-State-Zip: | LOXAHATCHEE FL 33470 | |

Certificate of Status Desired: No

FILED May 15, 2016 Secretary of State CC9216046754

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1500003316

Entity Name: DEFENDERS POLICE MEMORIAL FUND INC.

Current Principal Place of Business:

16303 69TH STREET NORTH LOXAHATCHEE, FL 33470

Current Mailing Address:

16303 69TH STREET NORTH LOXAHATCHEE. FL 33470

FEI Number: NOT APPLICABLE

TREASURER

05/15/2016

Date