2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000010204

Entity Name: FLORIDA DEPUTY SHERIFFS ASSOCIATION, INC.

Current Principal Place of Business:

2617 MAHAN DR TALLAHASSEE, FL 32308

Current Mailing Address:

PO BOX 12519 TALLAHASSEE, FL 32317 US

FEI Number: 20-4702355

Name and Address of Current Registered Agent:

DEAN, KEITH 2617 MAHAN DR TALLAHASSEE, FL 32308 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

••••••			
Title	PAST PRESIDENT	Title	EXEC
Name	SMITH, GORDON	Name	DEAN, KEITH
Address	2617 MAHAN DR	Address	2617 MAHAN DR
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308
Title	DIR	Title	DIR
Name	BURKE, ERIC A	Name	ADKINSON, MIKE
Address	2617 MAHAN DR	Address	2617 MAHAN DR
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308
Title	PRESIDENT	Title	VP
Title Name	PRESIDENT SMITH, A J	Title Name	VP STALEY, RICK
Name Address	SMITH, A J	Name	STALEY, RICK
Name Address	SMITH, A J 2617 MAHAN DR	Name Address	STALEY, RICK 2617 MAHAN DR
Name Address City-State-Zip:	SMITH, A J 2617 MAHAN DR TALLAHASSEE FL 32308	Name Address City-State-Zip:	STALEY, RICK 2617 MAHAN DR TALLAHASSEE FL 32308
Name Address City-State-Zip: Title	SMITH, A J 2617 MAHAN DR TALLAHASSEE FL 32308 SECRETARY	Name Address City-State-Zip: Title	STALEY, RICK 2617 MAHAN DR TALLAHASSEE FL 32308 TREASURER
Name Address City-State-Zip: Title Name	SMITH, A J 2617 MAHAN DR TALLAHASSEE FL 32308 SECRETARY PRENDERGAST, MIKE 2617 MAHAN DR	Name Address City-State-Zip: Title Name	STALEY, RICK 2617 MAHAN DR TALLAHASSEE FL 32308 TREASURER SMITH, BRAD 2617 MAHAN DR

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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: KEITH DEAN

EXECUTIVE DIRECTOR 02/03/2021

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

FILED Feb 03, 2021 Secretary of State 7008424813CC

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	MEALY, BOB	Name	GREEN, BOBBY
Address	2617 MAHAN DR	Address	2617 MAHAN DR
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308
Title	PAST PRESIDENT EMERITUS	Title	DIRECTOR
Name	WHITE, BOB	Name	DELOACH, GATOR
Address	2617 MAHAN DR	Address	2617 MAHAN DR
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308
Title	DIRECTOR		
Name	WOODS, BILLY		
Address	2617 MAHAN DR		

City-State-Zip: TALLAHASSEE FL 32308