

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704728

FILED  
Jan 17, 2009  
Secretary of State

**Entity Name:** FLORIDA STATE LODGE FRATERNAL ORDER OF POLICE, INC.

**Current Principal Place of Business:**

242 OFFICE PLAZA  
POB 1349 (32302)  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

242 OFFICE PLAZA  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

242 OFFICE PLAZA  
POB 1349 (32302)  
TALLAHASSEE, FL 32301

**New Mailing Address:**

**FEI Number:** 23-7585970      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MACK, LENNY  
242 OFFICE PLAZA  
TALLAHASSEE, FL 32301      US

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

MACK, KENNY  
242 OFFICE PLAZA  
TALLAHASSEE, FL 32301      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: KENNY MACK

01/17/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: 2VP ( ) Delete  
Name: MILLER, LONNIE  
Address: 242 OFFICE PLAZA, POB 1349  
City-St-Zip: TALLAHASSEE, FL 32301

Title: S ( ) Delete  
Name: MACK, KENNY  
Address: 242 OFFICE PLAZA, POB 1349  
City-St-Zip: TALLAHASSEE, FL 32301

Title: 1VP ( ) Delete  
Name: GARCIA, MARTIN P  
Address: 1090 SW 65TH AVE  
City-St-Zip: WEST MIAMI, FL 33144

Title: PD ( ) Delete  
Name: PRESTON, JAMES W  
Address: 242 OFFICE PLAZA, POB 1349  
City-St-Zip: TALLAHASSEE, FL 32301

Title: T ( ) Delete  
Name: BONNEY, THOMAS D  
Address: 242 OFFICE PLAZA, POB 1349  
City-St-Zip: TALLAHASSEE, FL 32301

Title: C ( ) Delete  
Name: LOCKWOOD, LARRY  
Address: 242 OFFICE PLAZA, POB 1349  
City-St-Zip: TALLAHASSEE, FL 32301

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

Title: 1VP (X) Change ( ) Addition  
Name: MILLER, LONNIE  
Address: 242 OFFICE PLAZA, POB 1349  
City-St-Zip: TALLAHASSEE, FL 32301

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: 2VP (X) Change ( ) Addition  
Name: AGUILAR, ARMANDO  
Address: 242 OFFICE PLAZA, POB 1349  
City-St-Zip: TALLAHASSEE, FL 32301

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: THOMAS BONNEY

T

01/17/2009

Electronic Signature of Signing Officer or Director

Date