2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723694

FILED Jan 11, 2007 Secretary of State

Entity Name: FLORIDA POLICE BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

300 E. BREVARD ST. TALLAHASSEE, FL 32301

Current Mailing Address: New Mailing Address:

300 E. BREVARD ST. TALLAHASSEE, FL 32301

FEI Number: 59-1475376 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GEORGE, ERNEST W. JOHN, RIVERA
300 E. BREVARD ST. 300 E. BREVARD ST.

TALLAHASSEE, FL 32301 US 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: JR 01/11/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: T (X) Change () Addition Name: GEORGE, ERNEST W. Name: GEORGE, ERNEST W.

Address: 300 E. BREVARD ST. Address: 300 E. BREVARD ST. City-St-Zip: TALLAHASSEE, FL City-St-Zip: TALLAHASSEE, FL

Title: T () Delete Title: PD (X) Change () Addition

Name: RIVERA, JOHN Name: RIVERA, JOHN

Address: 10680 N.W. 25TH STREET Address: 10680 N.W. 25TH STREET

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL

Title: VD () Delete Title: () Change () Addition

 Name:
 MCHALE, MICHAEL
 Name:

 Address:
 300 EAST BREVARD ST
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:

Title: SAA () Delete Title: () Change () Addition

 Name:
 CHAMPION, VINCE
 Name:

 Address:
 300 E BREVARD ST
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 CLIFTON, MIKE
 Name:

 Address:
 1519 NW 79TH AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 BRICKMAN, RICHARD
 Name:

 Address:
 2650 WEST STATE ROAD 84
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33312
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JR PD 01/11/2007