

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90265 027 ****70.00

DOCUMENT # 727062

1. Entity Name

BREVARD COUNTY POLICE BENEVOLENT ASSOCIATION, IN C.



Principal Place of Business

**1660 TOMOKA FARMS ROAD
DAYTONA BEACH FL 32124
US**

Mailing Address

**1660 TOMOKA FARMS ROAD
DAYTONA BEACH FL 32124
US**

90003073



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

1660 Tomoka Farms Road

Suite, Apt. #, etc.

3. Mailing Address

1660 Tomoka Farms Road

Suite, Apt. #, etc.

City & State

Port Orange, FL

City & State

Port Orange, FL

4. FEI Number **59-1713854**

Applied For

Not Applicable

Zip

32128-3720

Country

USA

Zip

32128-3720

Country

USA

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MCGUIRE, PATRICK L JR
1660 TOMOKA FARMS ROAD
DAYTONA FL 32124**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Change per UPS -

City

Port Orange

FL

Zip Code

32128-3720

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **CHAMPION, VINCENT L**
STREET ADDRESS **1660 TOMOKA FARMS ROAD**
CITY-ST-ZIP **DAYTONA FL 32124**

TITLE **VD** ☒ Delete
NAME **STUART, JEFFREY**
STREET ADDRESS **1660 TOMOKA FARMS ROAD**
CITY-ST-ZIP **DAYTONA BEACH FL 32124**

TITLE **DD** ☐ Delete
NAME **MCGUIRE, PATRICK L JR.**
STREET ADDRESS **1660 TOMOKA FARMS ROAD**
CITY-ST-ZIP **DAYTONA FL 32124**

TITLE **STD** ☐ Delete
NAME **BLAIS, GILLES**
STREET ADDRESS **1660 TOMOKA FARMS ROAD**
CITY-ST-ZIP **DAYTONA FL 32124**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **Port Orange, FL 32128-3720**

TITLE ☒ Change ☐ Addition
NAME **Rocque, James**
STREET ADDRESS **1660 Tomoka Farms Road**
CITY-ST-ZIP **Port Orange, FL 32128-3720**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **Port Orange, FL 32128-3720**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **Port Orange, FL 32128-3720**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Vincent L. Champion**
President

01/10/03

(386) 258-7579

CR2E037 (10/02)