

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731655

FILED
Jan 14, 2009
Secretary of State

Entity Name: THE HILLSBOROUGH COUNTY POLICE BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business:

412 E MADISON ST
SUITE 1102
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

412 E MADISON ST
SUITE 1102
TAMPA, FL 33602

New Mailing Address:

FEI Number: 23-7444894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STULL, JEFFREY ESQ.
602 SOUTH BLVD.
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

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

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROULEAU, MIKE
Address: 412 E MADISON ST., SUITE 1102
City-St-Zip: TAMPA, FL 33602

Title: 1VP () Delete
Name: MAROLDA, NICK
Address: 412 E MADISON ST., SUITE 1102
City-St-Zip: TAMPA, FL 33602

Title: 2VP () Delete
Name: DICKEY, STEVE
Address: 412 E MADISON ST., SUITE 1102
City-St-Zip: TAMPA, FL 33602

Title: T () Delete
Name: DOTY, DAVID
Address: 412 E MADISON ST., SUITE 1102
City-St-Zip: TAMPA, FL 33602

Title: SEC () Delete
Name: MOLINS, MARK
Address: 412 E MADISON ST. SUITE 1102
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAROLDA, NICK
Address: 412 E MADISON ST., SUITE 1102
City-St-Zip: TAMPA, FL 33602

Title: 1VP (X) Change () Addition
Name: ROULEAU, MIKE
Address: 412 E MADISON ST., SUITE 1102
City-St-Zip: TAMPA, FL 33602

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

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

Title: DIR (X) Change () Addition
Name: DIAMOND, JIM
Address: 412 E MADISON ST. SUITE 1102
City-St-Zip: TAMPA, FL 33602

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: JIM DIAMOND

DIR

01/14/2009

Electronic Signature of Signing Officer or Director

Date