

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **732670** (5)

1. Corporation Name

VOLUSIA COUNTY POLICE CHIEFS ASSOCIATION, INCORPORATED



Principal Place of Business

Mailing Address

**170 W. GRANADA BLVD
ORMOND BEACH FL 32174
US**

**170 W. GRANADA BLVD
ORMOND BEACH FL 32174
US**

3. Date Incorporated or Qualified
05/06/1975

3a. Date of Last Report
01/27/1995

2. Principal Place of Business

2a. Mailing Address

21 **440 South Beach St.**

26 **440 South Beach St.**

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23 **Daytona Beach, Fla.**

28 **Daytona Beach, Fla.**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

Zip

Country

Zip

Country

24 **32114**

25 **USA**

29 **32114**

30 **USA**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STEWART, ROBERT L
170 W. GRANADA BLVD.
ORMOND BEACH FL 32174**

81 Name

Howard S. McBride

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

440 South Beach St.

83

84 City

Daytona Beach,

FL

85 Zip Code

32114

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Howard S. McBride*

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

(NOTE: Registered Agent signature required when reappointing)

2/9/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **PD
CROW, PAUL B**
STREET ADDRESS **990 ORANGE AVENUE**
CITY-ST-ZIP **DAYTONA BEACH FL**

11 TITLE ☒ Change ☐ Addition

12 NAME **PD
Stewart, Robert L.**
13 STREET ADDRESS **170 W. Granada Blvd.**
14 CITY-ST-ZIP **Ormond Beach, Fla.**

TITLE ☐ DELETE

NAME **VD
KIRVAN, JOHN D**
STREET ADDRESS **440 S. BEACH STREET**
CITY-ST-ZIP **DAYTONA FL**

21 TITLE ☒ Change ☐ Addition

22 NAME **VD
Fleming, Denver H.**
23 STREET ADDRESS **1400 N. Dixie Freeway, New Smyrna Bch,**
24 CITY-ST-ZIP **Fla.**

TITLE ☐ DELETE

NAME **STD
STEWART, ROBERT**
STREET ADDRESS **170 W. GRANADA BLVD.**
CITY-ST-ZIP **ORMOND BEACH FL**

31 TITLE ☒ Change ☐ Addition

32 NAME **STD
McBride, Howard S.**
33 STREET ADDRESS **440 S. Beach St.**
34 CITY-ST-ZIP **Daytona Beach, Fla.**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)