2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#740019

FILED Mar 31, 2009 Secretary of State

Entity Name: ST. PETERSBURG RETIRED POLICE OFFICERS ASSOCIATION, INC.

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

7791-55 ST. NORTH 7791-55 ST. NORTH

PINELLAS PARK, FL 34665 PINELLAS PARK, FL 33781

Current Mailing Address: New Mailing Address:

7791-55 ST. NORTH 7791-55 ST. NORTH

PINELLAS PARK, FL 34665 PINELLAS PARK, FL 33781

FEI Number: 59-1778713 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:

WALLIS D. SWARTZ WALLIS D. SWARTZ 7791-55 ST. NORTH 7791-55 ST. NORTH

PINELLAS PARK, FL 34665 US PINELLAS PARK, FL 33781 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: 03/31/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 itle:
 P
 () Delete

 Title:
 P
 (X) Change () Addition

 Name:
 ROBBIUS, HAROLD M
 Name:
 ROBBINS, HAROLD M

 Address:
 11588 SHELLY CIR
 Address:
 11588 SHELLY CIR

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:
 SEMINOLE, FL 33772

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 EDWARD I, DOSTER,
 Name:
 DOSTER, EDWARD O

 Address:
 7659-18 ST. NORTH
 Address:
 7659-18 ST. NORTH

 City-St-Zip:
 ST. PETERBURG, FL 33702
 City-St-Zip:
 ST. PETERBURG, FL 33702

Title: ST () Delete Title: ST (X) Change () Addition

Name: WALLIS D. SWARTZ, Address: 7791-55 ST. NORTH
City-St-Zip: PINELLAS PARK, FL 34665

Name: SWARTZ, WALLIS D
Address: 7791-55 ST. NORTH
City-St-Zip: PINELLAS PARK, FL 33781

Title: BOD () Delete Title: () Change () Addition

 Name:
 OSSMANN, JOHN H
 Name:

 Address:
 10090 38TH WAY NORTH
 Address:

 City-St-Zip:
 PINELLAS PARK, FL 33782
 City-St-Zip:

Title: BOD () Delete Title: () Change () Addition

 Name:
 STINSON, ROBERT A
 Name:

 Address:
 6584-27 ST N
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33702
 City-St-Zip:

Title: BOD () Delete Title: () Change () Addition

 Name:
 MCCINTYRE, THOMAS M
 Name:

 Address:
 2201 65TH PLACE NORTH
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33702
 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: WALLIS D. SWARTZ ST 03/31/2009