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Amend

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 SEP 10 PM 2:36

FILED

SEP 10 2012

T. ROBERTS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 23, 2012

RALPH J. PFLIEGER
1847 WESTERHAM LOOP
TRINITY, FL 34655

SUBJECT: ST. PETERSBURG RETIRED POLICE OFFICERS ASSOCIATION,
INC.
Ref. Number: 740019

We have received your document for ST. PETERSBURG RETIRED POLICE OFFICERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you completed the wrong form per our telephone conversation on 8/23/12.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts
Regulatory Specialist II

Letter Number: 912A00021705

RECEIVED

12 SEP 10 AM 9:49

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: St. Petersburg Retired Police Officers Association, Inc.

DOCUMENT NUMBER: 740019

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ralph J. Pflieger

Name of Contact Person

St. Petersburg Retired Police Officers Association, Inc.

Firm/ Company

1847 Westerham Loop

Address

Trinity, FL 34655-7178

City/ State and Zip Code

SPRPOA@TAMPABAY.RR.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ralph J. Pflieger

Name of Contact Person

at (727) 251-8696

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee
pd.
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

12 SEP 10 PM 2:36

(Name of Corporation as currently filed with the Florida Dept. of State)

St. Petersburg Retired Police Officers Association, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1847 Westerham Loop
Trinity, FL 34655-7178

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1847 Westerham Loop
Trinity, FL 34655-7178

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Ralph J. Pflieger
1847 Westerham Loop
(Florida street address)

New Registered Office Address: Trinity, Florida 34655-7178
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Ralph J. Pflieger
Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input checked="" type="checkbox"/> <u>Remove</u>	<u>ST</u>	<u>Wallis D. Swartz</u>	<u>7791 55th St. N.</u> <u>Pinellas Park, FL 33781</u>
2) <input checked="" type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	<u>D</u>	<u>Ralph J. Pflieger</u>	<u>1847 Westerham Loop</u> <u>Trinity, FL 34655-7178</u>
3) <input type="checkbox"/> <u>Change</u> <input checked="" type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	<u>ST</u>	<u>Ralph J. Pflieger</u>	<u>1847 Westerham Loop</u> <u>Trinity, FL 34655</u>
4) <input type="checkbox"/> <u>Change</u> <input checked="" type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	<u>D</u>	<u>Jerry J. Lynch</u>	<u>3112- 34th Av. N.</u> <u>St. Petersburg, FL 33713</u>
5) <input type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	_____	_____	_____
6) <input type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	_____	_____	_____

The date of each amendment(s) adoption: 7-8-12

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

“The number of votes cast for the amendment(s) was/were sufficient for approval
by _____.”
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated July 8, 2012

Signature David C. Milchan

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

David C. Milchan
(Typed or printed name of person signing)

President
(Title of person signing)