

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 30, 2001 8:00 am  
Secretary of State

03-30-2001 90324 009 \*\*\*\*61.25

DOCUMENT # 758804

1. Entity Name

THE POLK COUNTY POLICE CHIEFS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2 NORTH LAKE REEDY BLVD.  
FROSTPROOF FL 33843

2 NORTH LAKE REEDY BLVD.  
FROSTPROOF FL 33843

2. Principal Place of Business

3. Mailing Address

75 N. 7th STREET

P.O. BOX 129

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

EAGLE LAKE, FL

City & State

EAGLE LAKE, FL

4. FEI Number

59-2969479

Applied For

Not Applicable

Zip

33839

Country

USA

Zip

33839

Country

USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BYRD, CHIEF J. NEAL  
2 NORTH LAKE REEDY BLVD.  
FROSTPROOF FL 33843

Name J. R. Sullivan

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

(P. O. Box 129)

City Eagle Lake

FL

Zip Code 33839

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.

SIGNATURE

J. R. Sullivan J.R. SULLIVAN SECRETARY/TREASURER/DIRECTOR

02/19/2001

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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME ROMINE, DAVID  
STREET ADDRESS 551 3RD STREET NE  
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE P/D ☐ Change ☒ Addition  
NAME Sandvik, Eric  
STREET ADDRESS 450 North Broadway Ave.  
CITY-ST-ZIP Bartow, FL 33830

TITLE PD ☐ Delete  
NAME ROMINE, DAVID C  
STREET ADDRESS 551 THIRD ST, NW  
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE V/D ☒ Change ☐ Addition  
NAME LeVine, Mark E.  
STREET ADDRESS 133 E. Tillman Ave.  
CITY-ST-ZIP Lake Wales, FL 33853

TITLE STD ☐ Delete  
NAME BYRD, J. NEAL  
STREET ADDRESS 2 NORTH LAKE REEDY BLVD.  
CITY-ST-ZIP FROSTPROOF FL 33843

TITLE S/T/D ☒ Change ☐ Addition  
NAME Sullivan, J. R.  
STREET ADDRESS 75 North Seventh St  
CITY-ST-ZIP Eagle Lake, FL 33839

TITLE D ☐ Delete  
NAME SULLIVAN, JR  
STREET ADDRESS 75 NORTH 7TH STREET  
CITY-ST-ZIP EAGLE LAKE FL 33839

TITLE D ☐ Change ☐ Addition  
NAME Heathcote, I. W.  
STREET ADDRESS 15 Northwest First St.  
CITY-ST-ZIP Ft. Meade, FL 33841

TITLE D ☐ Delete  
NAME LEVINE, MARK  
STREET ADDRESS 133 E. TILLMAN AVE.  
CITY-ST-ZIP LAKE WALES FL 33853

TITLE D ☐ Change ☒ Addition  
NAME Guess, William F.  
STREET ADDRESS 106 Center St.  
CITY-ST-ZIP Dundee, FL 33838

TITLE D ☐ Delete  
NAME HEATHCOTE, I.W.  
STREET ADDRESS 15 NW 1ST STREET  
CITY-ST-ZIP FORT MEADE FL 33841

TITLE D ☒ Change ☐ Addition  
NAME Romine, David C.  
STREET ADDRESS 551 Third St., N.E.  
CITY-ST-ZIP Winter Haven, FL 33881

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: CHIEF J. NEAL BYRD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/01

Date

(863) 293-5677

Daytime Phone #

CR2E037 (10/00)