

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005 8:00 am
Secretary of State

01-21-2005 90051 037 ****61.25

DOCUMENT # 758804 1. Entity Name THE POLK COUNTY POLICE CHIEFS ASSOCIATION, INC.					
Principal Place of Business 101 EAST CANAL STREET MULBERRY, FL 33860 US			Mailing Address P.O. BOX 36 MULBERRY, FL 33860 US		
2. Principal Place of Business 104 SOUTH CHURCH AVENUE Suite, Apt. #, etc. 50 MULBERRY POLICE DEPT		3. Mailing Address Suite, Apt. #, etc. City & State MULBERRY, FL		4. FEI Number 59-2969479	
City & State MULBERRY, FL		City & State Zip 33860		Country US.	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent GRAHAM, ALAN P 101 EAST CANAL STREET P.O. BOX 707 MULBERRY, FL 33860			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL		Zip Code 			
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: ALAN P. GRAHAM, STD 01/17/2005 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOATNER, ROGER 219 NO MASSACHUSETTS AVE. LAKE LAND, FL 33801	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D →	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIRKLAND, DARRELL 125 NO. SILVER LAKE DR. N.W. WINTER HAVEN, FL 33881	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D I.W. HEATHCOTE 15 N.W. 1ST STREET FT. MEADE, FL 33841	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SULLIVAN, J R 75 N. 7TH ST EAGLE LAKE, FL 33839	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERIK SANDVIK 450 NO. BROADWAY AVE BARTOW, FL 33830	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WEST, MORRIS 35400 HWY 27 NORTH HAINES CITY, FL 33844	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD →	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GRAHAM, ALAN P P.O. BOX 36 MULBERRY, FL 33860	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VB WILLIAM A. BODENHEIMER 190 NO. SEMINOLE AVENUE LAKE ALFRED, FL 33850	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BYRD, NEAL 2 NORTH LAKE REEDY BLVD. FROSTPROOF, FL 33843	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDWARD FREEMAN P.O. BOX 126 LAKE HAMILTON, FL 33851	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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: 01/17/2005 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #</small>					