## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#765679**

FILED Apr 29, 2005 Secretary of State

Entity Name: FRATERNAL ORDER OF POLICE, STATE OF FLORIDA, DISTRICT 7 INC.

	Principal Place of Business:	New Principal Place of Business:
	ATER HYACINTH DRIVE D, FL 32825 US	
Current N	Mailing Address:	New Mailing Address:
PO BOX 7 ORLANDO	720344 D, FL 32872 US	
FEI Number	: 59-2158232 FEI Number Applied I	For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and	d Address of Current Registered A	Agent: Name and Address of New Registered Agent:
SCOTT, E 5341 MICI SANFORI	DAVE HIGAN AVE D, FL 32771 US	
	e named entity submits this statemer e of Florida.	nt for the purpose of changing its registered office or registered agent, or bot
SIGNATU	RE:	
	Electronic Signature of Regis	stered Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECT
Title: Name: Address: City-St-Zip:	PDD ( ) Delete SCOTT, DAVID 5341 MICHIGAN AVE SANFORD, FL	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Name: Address:	SCOTT, DAVID 5341 MICHIGAN AVE	Name: Address:
Name: Address: City-St-Zip: Title: Name: Address:	SCOTT, DAVID 5341 MICHIGAN AVE SANFORD, FL  CVDT ( ) Delete SIMONSEN, BOB PO BOX 720344	Name: Address: City-St-Zip: Title: ( ) Change ( ) Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID SCOTT P 04/29/2005