

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766375

FILED
Apr 11, 2006
Secretary of State

Entity Name: BIG BEND LAW ENFORCEMENT ASSOCIATION, INC.

Current Principal Place of Business:

2714 GRAVES ROAD
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

1124 WINFIELD FOREST DRIVE
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-2261806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARNADORE, ART
2520 NORTH MONROE
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: CREWS, TERI H
Address: 1124 WINFIELD FOREST DRIVE
City-St-Zip: TALLAHASSEE, FL 32317

Title: D () Delete
Name: VARNADORE, ARTHUR V
Address: 2520 NORTH MONROE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: MEGGS, WILLIE
Address: 301 S MONROE ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: DS () Delete
Name: SCHMIDT, JOHN
Address: P.O. BOX 727
City-St-Zip: TALLAHASSEE, FL 32302

Title: D () Delete
Name: BURKE, KELLY
Address: 234 EAST 7TH AVENUE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: GARNER, CHARLES
Address: 1300 MICCOSOKEE ROAD
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TRAMMELL, MARK
Address: 2100 MAHAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DS (X) Change () Addition
Name: BURKE, KELLY
Address: 234 EAST 7TH AVENUE
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TERI H. CREWS

DT

04/11/2006

Electronic Signature of Signing Officer or Director

Date