

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90238 048 ****61.25

DOCUMENT # 766375

1. Entity Name
BIG BEND LAW ENFORCEMENT ASSOCIATION, INC.



Principal Place of Business

**2415 N MONROE ST
TALLAHASSEE FL 32303
US**

Mailing Address

**3308 CHARLESTON RD
C/O LYNN D. CHANG
TALLAHASSEE FL 32308
US**

2. Principal Place of Business
Same

3. Mailing Address
Post Office Box 180113

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Tallahassee, Florida

4. FEI Number **59-2261806**

Applied For

Not Applicable

Zip

Country

Zip
32318

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CHANG, LYNN D
3308 CHARLESTON RD
TALLAHASSEE FL 32308**

7. Name and Address of New Registered Agent

Name
Art Varnadore

Street Address (P.O. Box Number is Not Acceptable)
2520 North Monroe

City
Tallahassee

FL

Zip Code
32303

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

03-26-05

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DS** ☐ Delete
NAME **CHANG, LYNN D**
STREET ADDRESS **3308 CHARLESTON RD**
CITY-ST-ZIP **TALLAHASSEE FL 32308**

TITLE **D** ☒ Delete
NAME **KELLY, DAVID**
STREET ADDRESS **2100 MAHAN DR**
CITY-ST-ZIP **TALLAHASSEE FL 32308**

TITLE **D** ☐ Delete
NAME **MEGGS, WILLIE**
STREET ADDRESS **301 S MONROE ST**
CITY-ST-ZIP **TALLAHASSEE FL 32301**

TITLE **D** ☐ Delete
NAME **LASSITER, GARRY**
STREET ADDRESS **234 EAST 7TH AVENUE**
CITY-ST-ZIP **TALLAHASSEE FL 32303**

TITLE **D** ☐ Delete
NAME **GRIX, ANNE**
STREET ADDRESS **325 JOHN KNOX RD., SUITE C100**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **D** ☐ Delete
NAME **GARNER, CHARLES**
STREET ADDRESS **1300 MICCOSKEE ROAD**
CITY-ST-ZIP **TALLAHASSEE FL 32308**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Arthur V. Varnadore, Jr.** ☐ Change ☒ Addition
NAME **2520 North Monroe**
STREET ADDRESS **Tallahassee, FL 32303**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Treasurer/Director** ☒ Change ☐ Addition
NAME **Anne Grix**
STREET ADDRESS **325 John Knox Rd, C-100**
CITY-ST-ZIP **Tallahassee, FL 32303**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

[Signature]

03-25-03

487-0486

CR2E037 (10/02)