

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N00499** (6)

1. Corporation Name  
**THE STATE OF FLORIDA ASSOCIATION OF POLICE ATHLETIC LEAGUES, INC.**



Principal Place of Business Mailing Address  
2014 KENNETH ST.  
P.O. BOX 9961 (32208)  
JACKSONVILLE FL 32207  
US

3. Date Incorporated or Organized <b>12/21/1983</b>	3a. Date of Last Report <b>04/03/1995</b>
4. FEI Number <b>59-2624887</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Name and Address of New Registered Agent	

2. Principal Place of Business 21. Subst. Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Subst. Apt. #, etc. 27. City & State 28. Zip 29. Country
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81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	<b>FL</b>
83.	
84. City	

9. Name and Address of Current Registered Agent  
**DEMERS, NORMAN O.  
2014 KENNETH ST.  
JACKSONVILLE FL 32207**

11. Pursuant to the provisions of Section 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Chapter 617.0503, Florida Statutes.

SIGNATURE: *Norman O. Demers* Executive Director *January 23, 1996*

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS																																																																																																																																				
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14. I, as hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Norman O. Demers* Executive Director January 23, 1996

CR2E037 (12/95)