

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006017

FILED
Jan 15, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA CODE ENFORCEMENT ASSOCIATION, INC.

Current Principal Place of Business:

2345 PROVIDENCE BLVD.
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

1213 OXFORD WAY
COCOA, FL 32922

New Mailing Address:

FEI Number: 75-3055713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, DUREE B
1213 OXFORD WAY
COCOA, FL 32922 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: P () Delete
Name: GARCIA, HECTOR
Address: 2345 PROVIDENCE BLVD.
City-St-Zip: DELTONA, FL 32725

Title: T () Delete
Name: ALEXANDER, DUREE
Address: 105 POLK AVENUE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VP () Delete
Name: LEIGH, DEBORAH
Address: SNP-DISTRICT 3, 100 BUSH BLVD.
City-St-Zip: MELBOURNE, FL 32940

Title: SD () Delete
Name: KERR, JENNIFER
Address: 2725 FRAN JAMEISON WAY
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: HAROLD, MARK
Address: 2725 FRAN JAMEISON WAY
City-St-Zip: MELBOURNE, FL 32940

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: SD (X) Change () Addition
Name: JOSEPH, DENA
Address: 1000 CITY CENTER CIRCLE
City-St-Zip: PORT ORANGE, FL 32129

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

I hereby certify that the information supplied with this filing does not qualify 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: DUREE ALEXANDER

T

01/15/2009

Electronic Signature of Signing Officer or Director

Date