

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002199

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** NATIONAL LATINO PEACE OFFICER'S ASSOCIATION, CENTRAL FLORIDA CHAPTER, INC.

**Current Principal Place of Business:**

100 S HUGHLY AVE  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 2667  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 04-3745693

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARENAS, DAVID  
100 S HUGHLY AVE  
ORLANDO, FL 32801 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  
Name: ARENAS, DAVID  
Address: P.O. BOX 2667  
City-St-Zip: ORLANDO, FL 32801

Title: VP  
Name: SAEZ, ANIBAL  
Address: P.O. BOX 2667  
City-St-Zip: ORLANDO, FL 32801

Title: S  
Name: ACEVEDO, CARMEN  
Address: P.O. BOX 2667  
City-St-Zip: ORLANDO, FL 32801

Title: T  
Name: PEREZ, IRIS  
Address: P.O. BOX 2667  
City-St-Zip: ORLANDO, FL 32801

I hereby 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 all other like empowered.

SIGNATURE: DAVE ARENAS

PRES

04/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date