

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008161

FILED
Jan 07, 2010
Secretary of State

Entity Name: FLORIDA STATE LODGE FRATERNAL ORDER OF POLICE MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

242 OFFICE PLAZA
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PO BOX 1349
TALLAHASSEE, FL 323021349

New Mailing Address:

FEI Number: 35-2216194 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MACK, KENNY
242 OFFICE PLAZA
TALLAHASSEE, FL 32301 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: 1VP
Name: MILLER, LONNIE
Address: 242 OFFICE PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: S
Name: MACK, KENNY
Address: 242 OFFICE PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: TD
Name: BONNEY, THOMAS D
Address: 242 OFFICE PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: 2VP
Name: AGUILAR, ARMANDO
Address: 242 OFFICE PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: PD
Name: PRESTON, JAMES W
Address: 242 OFFICE PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: CTD
Name: PORTER, BRUCE
Address: PO BOX 1555
City-St-Zip: SARASOTA, FL 34260

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: THOMAS D. BONNEY

TD

01/07/2010

Electronic Signature of Signing Officer or Director

Date