## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000010298

CAVALIERE, JOHN

CLEARWATER, FL 33761

2519 MCMULLEN BOOTH RD STE 510-287

Name:

Address:

City-St-Zip:

Entity Name: COPS FOR THE CAUSE, INC

FILED Apr 04, 2005 Secretary of State

Entity Nan	ne: COPS FOR	THE CAUSE, INC				
Current Pr	incipal Place of	Business:	New Princ	ipal Place	of Business:	
SUITE 510	ULLEN BOOTH   -287 .TER, FL 33761	RD US				
Current Ma	ailing Address:		New Maili	ng Address	<b>S:</b>	
	ULLEN BOOTH	RD				
SUITE 510-287 CLEARWATER, FL 33761		US				
FEI Number:		FEI Number Applied For()	FEI Number Not Appl	icable (X)	Certificate of Status Desired ( )	
Name and	Address of Cur	rent Registered Agent:	Name and	Address o	f New Registered Agent:	
1623 N. HÍO CLEARWA		US omits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent			ent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () De WALSER, JONATH 1623 N. HIGHLANI CLEARWATER, FI	IAN B DAVE.	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete SQUILLANTE, STEVE 2519 MCMULLEN BOOTH RD SUITE 510-287 CLEARWATER, FL 33761 US		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () Delete DIVINCENT, JEFFREY 2519 MCMULLEN BOOTH RD SUITE 510-287 CLEARWATER, FL 33761 US		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:		(X) Change ()Addition CLYDE ILLEN BOOTH RD SUITE 510-287 ER, FL 33761 US	
Title:	D () De	elete	Title:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JONATHAN WALSER D 04/04/2005