

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010415

FILED
Jan 07, 2011
Secretary of State

Entity Name: RETIRED POLICE OFFICERS COUNCIL LOVE FUND, INC.

Current Principal Place of Business:

10680 NW 25TH STREET
SUITE 310
DORAL, FL 33172 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 570790
MIAMI, FL 33257 US

New Mailing Address:

FEI Number: 77-0616090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUGH, LLOYD F
10680 NW 25TH STREET
SUITE 310
DORAL, FL 33172 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: PD
Name: HOUGH, LLOYD F
Address: 10680 NW 25TH STREET, SUITE 310
City-St-Zip: DORAL, FL 33172 US

Title: VD
Name: CLARKE, JOAN
Address: 10680 NW 25TH STREET, SUITE 310
City-St-Zip: DORAL, FL 33172 US

Title: TD
Name: SPISAK, EDWARD R
Address: 10680 NW 25TH STREET, SUITE 310
City-St-Zip: DORAL, FL 33172 US

Title: SD
Name: SAVAGE, BARRY
Address: 10680 NW 25TH STREET, SUITE 310
City-St-Zip: DORAL, FL 33172 US

Title: D
Name: BAMBACH, DENNIS
Address: 10680 NW 25TH STREET, SUITE 310
City-St-Zip: DORAL, FL 33172 US

Title: D
Name: WALTERS, MARY
Address: 10680 NW 25TH STREET, SUITE 310
City-St-Zip: DORAL, FL 33172 US

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: LLOYD F. HOUGH

PD

01/07/2011

Electronic Signature of Signing Officer or Director

_____ Date