

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006778

FILED
Jan 22, 2007
Secretary of State

Entity Name: NYCPD VETERANS FOUNDATION, INC.

Current Principal Place of Business:

P.O. BOX 1013
LECANTO, FL 34460

New Principal Place of Business:

2778 W AXELWOOD DR.
BEVERLY HILLS, FL 34465

Current Mailing Address:

P.O. BOX 1013
LECANTO, FL 34460

New Mailing Address:

2778 W AXELWOOD DR.
BEVERLY HILLS, FL 34465

FEI Number: 38-3709322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, RICHARD J
2778 W AXELWOOD DR
BEVERLY HILLS, FL 34465 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: CARROLL, RICHARD J
Address: 2778 W AXELWOOD DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: V () Delete
Name: LETIZIA, LEONARD
Address: 14153 SCRUB OAK LA
City-St-Zip: BROOSVILLE, FL 34613

Title: V () Delete
Name: CROCITTO, JOSEPH
Address: 69 WATCHOGUE RD
City-St-Zip: STATEN ISLAND, NY 10314

Title: S () Delete
Name: WEINHAUER, ALFRED
Address: 1706 KIHSMERE DR
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: T () Delete
Name: MONTELEONE, JOSEPH
Address: 3221 SHITE IBIS CIR #B1
City-St-Zip: PUNTA GORDA, FL 33950

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

Title: T (X) Change () Addition
Name: MONTELEONE, JOSEPH
Address: 3221 WHITE IBIS CIR #B1
City-St-Zip: PUNTA GORDA, FL 33950

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD J. CARROLL

P

01/22/2007

Electronic Signature of Signing Officer or Director

Date