2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006778

Entity Name: NYCPD VETERANS FOLINDATION INC

FILED Jan 03, 2008 Secretary of State

Littly Na	ille. NICED V	ETERANS FOUNDATION, IN	C.		
Current Principal Place of Business:			New Princip	New Principal Place of Business:	
	XELWOOD DR HILLS, FL 344				
Current Mailing Address:			New Mailing	New Mailing Address:	
	XELWOOD DR HILLS, FL 344				
FEI Number	: 38-3709322	FEI Number Applied For()	FEI Number Not Applica	able () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and A	ddress of New Registered Agent:	
2778 W AX	., RICHARD J XELWOOD DR HILLS, FL 344				
	named entity see of Florida.	submits this statement for the	ourpose of changing its	registered office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () CARROLL, RIC 2778 W AXELV BEVERLY HILL	VOOD DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () LETIZIA, LEON 14153 SCRUB BROOSVILLE,	OAK LA	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () CROCITTO, JO 69 WATCHOGU STATEN ISLAN	JE RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WEINHAUER, A 1706 KIHSMER		Name: 0 Address: 9	S (X) Change () Addition D'BRIEN, RICHARD 0820 ROYAL LYTHAM AVE BRADENTON, FL 34202	
Title:	T ()	Delete	Title:	() Change () Addition	

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

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD J. CARROLL **PRES** 01/03/2008

MONTELEONE, JOSEPH

3221 WHITE IBIS CIR #B1

PUNTA GORDA, FL 33950

Name: Address:

City-St-Zip: