

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001403

FILED
Mar 22, 2009
Secretary of State

Entity Name: JACKSONVILLE BEACH CITIZENS POLICE ACADEMY ALUMNI CORP

Current Principal Place of Business:

101 S. PENMAN RD
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

101 S. PENMAN RD
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3642555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORSON, LEE
101 S PENMAN ROAD
JACKSONVILLE BEACH, FL 32250 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: PRES () Delete
Name: DORSON, LEE
Address: 101 S PENMAN RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: ANTHONY, SARAH
Address: 101 S PENMAN ROAD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP () Delete
Name: OSTROWSKI, BILL
Address: 101 S PENMAN ROAD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DIR () Delete
Name: WARREN, MARGARET
Address: 101 S PENMAN RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DIR () Delete
Name: LASSITER, BILL
Address: 101 S PENMAN ROAD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

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.

SIGNATURE: SARAH ANTHONY

DIR

03/22/2009

Electronic Signature of Signing Officer or Director

Date