

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90170 005 ****61.25

DOCUMENT # N06000002006	
1. Entity Name MELBOURNE POLICE FOUNDATION, INC.	

Principal Place of Business 650 N APOLLO BLVD MELBOURNE FL 32935	Mailing Address 650 N APOLLO BLVD MELBOURNE FL 32935
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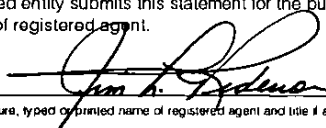
2. Principal Place of Business - No P.O. Box #	3. Mailing Address P.O. Box 1444
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Melbourne, FL	City & State Melbourne, FL
Zip 32902-1444	Country US

4. FEI Number 41-2197169		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KENDIG, JAMES C JR 650 N APOLLO BLVD MELBOURNE FL 32935	7. Name and Address of New Registered Agent Name: Jimmy L. Ridenour Street Address (P.O. Box Number is Not Acceptable): 650 N. Apollo Blvd City: Melbourne FL Zip Code: 32935
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: PCD NAME: KENDIG, JAMES C JR STREET ADDRESS: % HEATH FIRST - 1350 S HICKORY ST CITY-ST-ZIP: MELBOURNE FL 32901	☐ Delete	TITLE: PCD NAME: Jimmy L. Ridenour STREET ADDRESS: % MARSHALL COURT YARD 2101 W. NEW HAVEN CITY-ST-ZIP: Melbourne, FL 32904	☒ Change ☐ Addition
TITLE: PCD NAME: SHAREK, ROBERT J STREET ADDRESS: % ROCKWELL COLLINS - P O BOX 1060 CITY-ST-ZIP: MELBOURNE FL 32902	☐ Delete	TITLE: VPD NAME: Deborah L. Young STREET ADDRESS: % MIMA 200 E. SHERIDAN RD CITY-ST-ZIP: Melbourne, FL 32901	☐ Change ☒ Addition
TITLE: SD NAME: YOUNG, DEBORAH L STREET ADDRESS: % MIMA - 200 E SHERIDAN RD CITY-ST-ZIP: MELBOURNE FL 32901	☒ Delete	TITLE: TD NAME: JEFFREY S. Dick STREET ADDRESS: % THE BANK - 300 S. Harbor City Blvd CITY-ST-ZIP: Melbourne, FL 32901	☐ Change ☒ Addition
TITLE: PCD NAME: BRENNAN, WILLIAM T STREET ADDRESS: % THE BANK - 300 S HARBOR CITY BLVD CITY-ST-ZIP: MELBOURNE FL 32901	☐ Delete		☐ Change ☐ Addition
TITLE: D NAME: BARNIDGE, LEROY STREET ADDRESS: %NORTHROP GRUMMAN CORP-2000 W NASA BLVD CITY-ST-ZIP: MELBOURNE FL 32904	☐ Delete		☐ Change ☐ Addition
TITLE: D NAME: BEARS, PETER STREET ADDRESS: %WUESTHOFF HEALTH SYSTEM-110 LONGWOOD AVE CITY-ST-ZIP: ROCKLEDGE FL 32956	☒ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  JEFFREY S. Dick Treasurer/Director 4/9/07 321-953-2265