2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2009
Secretary of State

DOCUMENT# N07000005909

Entity Name: VERO BEACH POLICE FOUNDATION, INC.

Current Principal Place of Business:

1055 20TH STREET
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

1055 20TH STREET
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 26-0389742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DEC CONSULTANTS, INC.
1515 INDIAN RIVER BOULEVARD
SUITE A210
VERO BEACH, FL 32960 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: D ( ) Delete
Name: COTHERMAN, ROSS
Address: 735 44TH AVENUE, SW
City-St-Zip: VERO BEACH, FL 32968

Title: D ( ) Delete
Name: COWGILL, BRUCE
Address: 4854 S HARBOR DRIVE, UNIT 201
City-St-Zip: VERO BEACH, FL 32967

Title: D ( ) Delete
Name: BLAXILL DEAL, SUSAN
Address: 1503 W CAMINO DEL RIO
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete
Name: MOREIN, MARK W
Address: 657 LAKE DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete
Name: RAPPEL, ROBERT
Address: 6475 FRANCES MANOR
City-St-Zip: VERO BEACH, FL 32967

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: ROBERT RAPPEL D 06/25/2009

Electronic Signature of Signing Officer or Director — Date