

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002647

FILED
Jan 12, 2009
Secretary of State

Entity Name: JUPITER ISLAND POLICE OFFICERS ASSOCIATION, INC.

Current Principal Place of Business:

103 BUNKER HILL RD
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

103 BUNKER HILL RD
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 26-2496017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUNDHEIM JR., FREDERICK G
310 SW OCEAN BLVD
STUART, FL 34994 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: DP () Delete
Name: PAWLAK, BARRY R
Address: 5411 SE NASSAU TERRACE
City-St-Zip: STUART, FL 34997

Title: DVP () Delete
Name: LOGSDON, SCOTT W
Address: 1805 NW FORK RD
City-St-Zip: STUART, FL 34994

Title: DS () Delete
Name: CROUSE, RONALD
Address: 1001 SW JERICHO AVENUE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: T () Delete
Name: SUNDHEIM, CHRISTOPHER J
Address: 103 BUNKER HILL RD
City-St-Zip: HOBE SOUND, FL 33455

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: T (X) Change () Addition
Name: FLEMING, PATRICK
Address: 103 BUNKER HILL RD
City-St-Zip: HOBE SOUND, FL 33455

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: SCOTT W LOGSDON

DVP

01/12/2009

Electronic Signature of Signing Officer or Director

Date