

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002684

FILED  
Jan 26, 2012  
Secretary of State

**Entity Name:** DELAND CITIZENS POLICE ACADEMY ALUMNI, INC

**Current Principal Place of Business:**

219 W HOWRY AVE  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

219 W HOWRY AVE  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 26-2290706

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HENDERSON, RANDEL  
219 W HOWRY AVE  
DELAND, FL 32720 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  
Name: JARVIS, RICHARD  
Address: 627 ASTORIA DR  
City-St-Zip: DELAND, FL 32724

Title: D  
Name: ADAMS, FRANK  
Address: 135 S PINE ST  
City-St-Zip: DELAND, FL 32724

Title: D  
Name: SWEIGERT, JERRY W  
Address: 512 CYPRESS OAK CIR  
City-St-Zip: DELAND, FL 32720

Title: D  
Name: KOSIBA, BONNIE A  
Address: 143 SADDLEBROOK WAY  
City-St-Zip: DELAND, FL 32724

Title: D  
Name: RASI, LADDIE  
Address: 227 N CLARA AVE  
City-St-Zip: DELAND, FL 32720

Title: D  
Name: LENDEMER, KIMBERLY  
Address: 627 ASTORIA DR  
City-St-Zip: DELAND, FL 32724

I hereby 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 all other like empowered.

SIGNATURE: RANDEL HENDERSON

PRES

01/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date