2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# N08000008266

Entity Name: OKALOOSA LAW ENFORCEMENT BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business:

C/O OKALOOSA SHERIFF'S OFFICE ADMIN.
50 SECOND STREET
SHALIMAR, FL 32579

New Principal Place of Business:

Current Mailing Address:

C/O OKALOOSA SHERIFF'S OFFICE ADMIN.
50 SECOND STREET
SHALIMAR, FL 32579

New Mailing Address:

P O BOX 511
SHALIMAR, FL 32579

FEI Number: 26-3379889 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURRAY, JAMES R ESQ
JAMES R. MURRAY, P.A.
420 E PINE AVE
CRESTVIEW, FL 32536 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: PD ( ) Delete
Name: MORRIS, CHARLIE
Address: 1250 NORTH EGLIN PARKWAY
City-St-Zip: SHALIMAR, FL 32579

Title: VD ( ) Delete
Name: LITSCHAUER, TED
Address: 7 HOLLYWOOD BLVD, NE
City-St-Zip: FT WALTON BEACH, FL 32549

Title: SD ( ) Delete
Name: BARRINEAU, DEBRA
Address: 1250 NORTH EGLIN PARKWAY
City-St-Zip: SHALIMAR, FL 32579

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:

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: DEBRA A. BARRINEAU SD 01/07/2009

Electronic Signature of Signing Officer or Director — Date