

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008807

FILED
Apr 30, 2009
Secretary of State

Entity Name: DAYTONA POLICE OFFICER'S ASSOCIATION, INC.

Current Principal Place of Business:

523 MAGNOLIA AVE.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

P.O BOX 9776
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 26-3407154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEVCO
124 SOUTH ST.
DAYTONA BEACH, FL 32114 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: P () Delete
Name: GERNERT, CHRISTIE
Address: P.O BOX 9776
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: VP () Delete
Name: GRANT, STEVE
Address: P.O BOX 9776
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: SEC. () Delete
Name: OTERI, MIKE
Address: P.O BOX 9776
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: TREA () Delete
Name: MORFORD, BRIAN
Address: P.O BOX 9776
City-St-Zip: DAYTONA BEACH, FL 32114 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC. (X) Change () Addition
Name: OTERI, MIKE
Address: P.O BOX 9776
City-St-Zip: DAYTONA BEACH, FL 32114 US

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: CHRISTIE GERNERT

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date