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Apr 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N08426 (1) 1. Corporation Name THE FLORIDA SHERIFFS' COUNCIL OF ADVISORY DEPUTIES, INC.			
Principal Place of Business 540 N.E. 8TH STREET SUITE 200A FT. LAUDERDALE FL 33304 US		Mailing Address 540 N.E. 8TH STREET SUITE 200A FT. LAUDERDALE FL 33304-2715 US	
2. Principal Place of Business 21 277 S. W. 33rd COURT Suite, Apt. #, etc.		2a. Mailing Address 26 277 S. W. 33rd COURT Suite, Apt. #, etc.	
City & State 23 FT LAUDERDALE, FL Zip 33315-3305 Country USA		City & State 28 FT LAUDERDALE, FL Zip 33315-3305 Country USA	
3. Date Incorporated or Qualified 03/21/1985		3a. Date of Last Report 08/20/1996	
4. FEI Number 59-2600022		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent BUTLER, EARLE LEE, ESQ 1995 E OAKLAND PARK BLVD SUITE 100 FT. LAUDERDALE FL 33306		10. Name and Address of New Registered Agent	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
SIGNATURE <i>Phillip S. Baumgarten</i> PHILLIP S. BAUMGARTEN S/D APRIL 1, 1997 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC NICK NAVARRO 540 N.E. 8TH STREET FT. LAUDERDALE FL 33304	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D-T PHILLIP BAUMGARTEN 540 NE 8TH STREET FT. LAUDERDALE FL 33304	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	TREASURER/DIRECTOR PHILLIP S. BAUMGARTEN 277 S. W. 33rd COURT FT LAUDERDALE, FL 33315-3305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD EARLE LEE BUTLER, ESQ. 540 NE 8TH STREET FT. LAUDERDALE FL 33304	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	SECRETARY/DIRECTOR EARLE LEE BUTLER, ESQUIRE 1995 E. OAKLAND PARK BLVD FT LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VC-D FRED N. WINDRIDGE 540 NE 8TH STREET FT. LAUDERDALE FL 33304	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	VICE CHAIRMAN/DIRECTOR FRED N. WINDRIDGE 801 SEABREEZE BLVD., MARINA TOWER FT LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GUERRA, DONALD 540 NW 8TH STREET FT. LAUDERDALE FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JAMES STUART 540 N.E. 8TH STREET FT. LAUDERDALE FL 33304	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: <i>Phillip S. Baumgarten</i> PHILLIP S. BAUMGARTEN 4/1/97 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		(954) 768-9600 <small>Daytime Phone # 0035524</small>	

CR2E037 (9/96)