2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State
01-31-2003 90134 008 ****61.25

DOCUMENT # N08804

1. Entity Name

FLORIDA HIGHWAY PATROL RETIRED PERSONNEL ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4847 HEATHE DRIVE TALLAHASSEE FL 32308 US	4847 HEATHE DRIVE TALLAHASSEE FL 32308 US

2. Principal Place of Business	3. Mailing Address
4847 Heathe Drive	4847 Heathe Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tallahassee, FL	City & State: Tallahassee, FL
Zip: 32309-2118 Country: USA	Zip: 32309-2118 Country: USA

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COX, JAMES H 4847 HEATHE DRIVE TALLAHASSEE FL 32308	Name: Cox, James H. Street Address (P.O. Box Number is Not Acceptable): 4847 Heathe Drive City: Tallahassee FL Zip Code: 32309-2118

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SMITH, L.W. 340 SANTIAGO COURT LAKELAND FL 33809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Conroy, John A. 1664 Temple Terrace, Ft.Myers, FL339	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SUTHERLAND, DONALD C 12372 CLYDENE COURT JACKSONVILLE FL 32225	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Daniels, Julian 329 Arrowhead Lane Melbourne Beach, FL 32951	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST COX, JAMES H 4847 HEATHE DR TALLAHASSEE FL 32309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Walston, Don E. 1919 Quail Court Ft. Pierce, FL 34982	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOATRIGHT, THOMAS H 10230 SR HWY 441 BELLEVIEW FL 34420	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENDERSON, JR., JOE P 1713 DORA AVENUE TALLAHASSEE FL 32308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JETER, ROBERT L P.O BOX 57461 ORLANDO FL 32857	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James H. Cox JAMES H. COX JR. 01/29/03 850-893-2463