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Mar 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N12924** (9)

1. Corporation Name

RETIRED LAW ENFORCEMENT OFFICERS ASSOCIATION, IN C.

Principal Place of Business

Mailing Address

**3160 TARYTOWN ST
PO BOX 3201
PORT CHARLOTTE FL 33952
US**

**PO BOX 3201
PORT CHARLOTTE FL 33949
US**

3. Date Incorporated or Qualified

01/09/1986

4. FEI Number

59-2356747

Applied For

☒ Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WRIGHT, EDWARD J.
3160 TARYTOWN ST
PORT CHARLOTTE FL 33952**

81 Name

WRIGHT, EDWARD J.

82 Street Address (P.O. Box Number is Not Acceptable)

2500 AGUILOS CT

83

PORT CHARLOTTE

84 City

FL

85 Zip Code

33952

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/23/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P BASKETFIELD, WILLIAM**
STREET ADDRESS **11330 ESSEX DR**
CITY-ST-ZIP **LAKE SUZY FL**

TITLE ☐ DELETE
NAME **V BELL, ALTON**
STREET ADDRESS **1374 SALYERS ST**
CITY-ST-ZIP **PT CHARLOTTE FL**

TITLE ☐ DELETE
NAME **D RAPISARDI, GERALD**
STREET ADDRESS **502 LOWELL AVE**
CITY-ST-ZIP **PORT CHARLOTTE FL**

TITLE ☐ DELETE
NAME **T WRIGHT, EDWARD J.**
STREET ADDRESS **441 TARYTOWN ST.**
CITY-ST-ZIP **PORT CHARLOTTE FL**

TITLE ☐ DELETE
NAME **D STEINBAUGH, NELSON**
STREET ADDRESS **2760 W. MARION AVE.**
CITY-ST-ZIP **PUNTA GORDA FL**

TITLE ☐ DELETE
NAME **D BECKWITH, RONALD**
STREET ADDRESS **3317 BAYSIDE PARKWAY**
CITY-ST-ZIP **PUNTA GORDA FL**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

WRIGHT, EDWARD J.
2500 AGUILOS COURT
PORT CHARLOTTE, FL 33952

14. 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 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:

Edward J. Wright **3/23/98** **941-625-0167**

CR2E037 (10/97)