2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14030

FILED Sep 05, 2006 Secretary of State

Entity Name: NATIONAL ASSOCIATION OF POLICE EQUIPMENT DISTRIBUTORS, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	RKEY ROOST DR LLE, FL 32331		
Current Mailing Address:		New Mailing Address:	
	RKEY ROOST DR LLE, FL 32331		
In accordan	: 65-0015225 FEI Number Applied For() FEI N ce with s. 607.193(2)(b), F.S., the corporation did not receive I Address of Current Registered Agent:	· -	
PERTIERRA, TOM 712 E. TURKEY ROAST DRIVE GREENVILLE, FL 32331 US		PERTIERRA, TOM 712 E. TURKEY ROOST DRIVE GREENVILLE, FL 32331 US	
	named entity submits this statement for the purpose e of Florida.	of changing	its registered office or registered agent, or both,
SIGNATURE:			09/05/2006
	Electronic Signature of Registered Agent		Date
OFFICERS	S AND DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () Delete ALLAN, KAREN M 7609 MIDLOTHIAN TURNPIKE RICHMOND, VA 23235	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete CONVILLE, SEAN 772 CORPORATE CIRCLE NEW CUMBERLAND, PA 17070	Title: Name: Address: City-St-Zip:	P (X) Change () Addition CONVILLE, SEAN 772 CORPORATE CIRCLE NEW CUMBERLAND, PA 17070
Title: Name: Address: City-St-Zip:	S () Delete PERTIERRA, THOMAS A 712 TURKEY ROOST DRIVE GREENVILLE, FL 32331	Title: Name: Address: City-St-Zip:	D (X) Change () Addition HEINZEN, TIM 218 FOURPARK ROAD LAFAYETTE, LA 70507
Title: Name: Address: City-St-Zip:	D () Delete WINDER, RICHARD L JR 13200 REECK RD SOUTH SOUTHGATE, MI 48195	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete MAGOLDA, ANTHONY M 5521 WHITE HORSE PIKE EGG HARBOR CITY, NJ 08215	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DENNHARDT, ANDY 1309 5TH AVENUE MOLINE, IL 61265
Title: Name: Address:	P (X) Delete ORR, WI.LLIAM J JR 11 HILLWAY DRIVE ROUND ROCK, TX 78664	Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: SEAN CONVILLE P 09/05/2006