

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90057 008 ****61.25

DOCUMENT # N27099

1. Entity Name
**PRIVATE INVESTIGATOR'S ASSOCIATION OF FLORIDA,
INC.**



Principal Place of Business
**PO BOX 12483
TALLAHASSEE, FL 32317**

Mailing Address
**PO BOX 12483
TALLAHASSEE, FL 32317**

40023819



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02192007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3016012

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BONACUM, ANTHONY
4935 SOUTHWIND DR
MULBERRY, FL 33860**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

**Filing Fee is \$61.25
Due by May 1, 2007**

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

TITLE PD ☒ Delete
NAME LEY, JIM
STREET ADDRESS 6860 GULFPORT BLVD.
CITY-ST-ZIP SAINT PETERSBURG, FL 33707

TITLE PD ☐ Delete
NAME CHURCH, JAMES D
STREET ADDRESS PO BOX 3033
CITY-ST-ZIP PLANT CITY, FL 33656

TITLE T ☒ Delete
NAME BALASH, EVAN M
STREET ADDRESS 8895 MILITARY TRAIL 206-C
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE VP ☐ Delete
NAME BONACUM, ANTHONY
STREET ADDRESS 4935 SOUTHWIND DR
CITY-ST-ZIP MULBERRY, FL 33860

TITLE VPD ☐ Delete
NAME MURNAN, MARK J
STREET ADDRESS 600 SANDTREE DR, STE 210 A
CITY-ST-ZIP PALM BEACH GARDENS, FL 33403

TITLE VPD ☒ Delete
NAME IWAN, JULIE
STREET ADDRESS 1835 US 1 S, #119
CITY-ST-ZIP SAINT AUGUSTINE, FL 32084

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE T ☐ Change ☒ Addition
NAME GARY OTTO
STREET ADDRESS 12162 SW 51ST PL
CITY-ST-ZIP COOPER CITY, FL 33330

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #