FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #
1. Corporation Name

N28945

(6)

TAMPA	BAY AREA CHIEFS OF POL	ICE ASSOCIATION, IN	NC			
Principal Plac	e of Business	Mailing Address		A IMMINIMUM ALM HAMMI CONTO INTELLO	iskan atlis gistis kieto binet nenti, eskit binit 1801	
% TROY E. SURRENCY 611 S. COLLINS ST. PLANT CITY FL 33566 PLANT CITY FL 33566 PLANT CITY FL 33566			7. Ber 1588			
		,		3. Date Incorporated or Qualifi 10/20/1988	ed 3a. Date of Last Report 02/05/1996	
· `	face of Business Y E SURRENCY	2a. Mailing Address TROY E. SI	URRENCY	4. FEI Number 59-2974148	Applied For Not Applicable	
	. BOX 1588	Suite, Apt. #, etc. P.O. BOX		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	e NT CITY, FL.	CPLANT CIT	Y, FL.	Election Campaign Financin Trust Fund Contribution	9 \$5.00 May Be Added to Fees	
Zip 335			Country HILLS.	9. This corneration has tightlift.	for intangible tax under s. 199.032, Yes ANO	
	9. Name and Address of Current	Registered Agent		10. Name and Address of Nev	/ Registered Agent	
			81 Name	OY E. SURRENCY		
Surren 61 1 0 4	ICY, TROY E 30leins 3 t. <i>P. O - Box 15</i>	-88	82 Street			
PLANT (CITY FL 3356		B3	ANT CITY, FL.	7) 3359	
	,			ANT CITY, FL.	FL 85 7ip Code	
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statute	s, the above-named	corporation submits this statement for toporation's board of directors. I hereby a	he purpose of changing its registered	
agent. I a	im familiar with, and accept the obligat	ions of Section 617.0503, Flor	rida Statutes	poration a board of directors, Thereby a	coopt the appointment as registered	
SIGNATURE .	TROY E. SURA Signature, typed or printed name of registered agent	2 ENC // and title it applicable (NOTE	: Registered Agent signature	required men reinstating)		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO C	PFICERS AND DIRECTORS IN 12	
TITLE	P	≯ Z DELETE	1.1 TITLE	P	Change Addition	
NAME	Frankoski, raymond Chief	,	1.2 NAME	WILLOCKS, CURT 1	PRES.	
STREET ADDRESS	ADMIN. BUILDING SUITE 221		1.3 STREET ADDRESS	2401-53 ST. 50.		
CITY-ST-ZIP	CLEARWATER FL		1.4 City-St-ZiP	GULFPURT. FL.		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	BACA, SAM V.		2.2 NAME			
STREET ADDRESS	219 N MASSACHUSETTS AVE	NUE	2.3 STREET ADDRESS			
CITY-ST-ZIP	LAKELAND FL		2. 4 CITY-ST-ZIP			
TITLE	V	₹ DELETE	3.1 TITLE	Z)	☐ Change ► Addition	
NAME	WILLOCKS, CURT		3.2 NAME	THOMPSON, Phil		
STREET ADDRESS	2401 53 ST S		3.3 STREET ADDRESS	HUN 39 NO.		
CITY-ST-ZIP	GULFPORT FL		3.4. CITY - ST - ZIP	DADE CITY, FL		
TITLE	ST SUPPENOV TOOM	☐ DELETE	4.1 TITLE	· ·	Change Addition	
NAME	SURRENCY, TROY		4. 2 NAME	İ	•	
STREET ADDRESS	611 SOUTH COLLINS STREET		4.3 STREET ADDRESS			
CITY-ST-ZIP	PLANT CITY FL	☐ DELETE	4.4 CITY - \$7 - ZIP	 	Change Addition	
TITLE	V DOLDED DENNIE CHIEF	☐ DELETE	5.1 TITLE		FT Charitie FT Violation	
NAME	HOLDER, BENNIE CHIEF		5.2 NAME			
STREET ADDRESS	1710 TAMPA STREET		5.3 STREET ADDRESS	i		
CITY-ST-ZIP	TAMPA FL	₩ DELETE	5.4 CITY - ST - ZIP		Change Addition	
TITLE	D D	7 DELETE	6.1 TITLE	And the state of t		
NAME	JOLLY, GORDON CHIEF		6.2 NAME	FRANKOSKI, RNYMON		
STREET ADORESS	POST OFFICE BOX 3528		■ 6.3 STREET ADDRESS	Annia), Blue, Sum	. 21/	

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

ONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Messey 1-15-99 1813

FILED

Jan 27 1997 8:00am

Secretary of State

813 737-48 Daytime Phone # 0046165