

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

FILED
May 09, 2003 8:00 am
Secretary of State

05-09-2003 90144 035 ****70.00

DOCUMENT # N28945
1. Entity Name
TAMPA BAY AREA CHIEFS OF POLICE ASSOCIATION, INC



Principal Place of Business
**11250 North 56th Street
Temple Terrace, Florida
33617 USA**

Mailing Address
**% TROY E. SURRENCY
9917 HWY 99 SO
LITHIA FL 33547
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc. **C/Oe AN 60**
City & State
Zip Country

3. Mailing Address
**P.O. Box 291756
Temple Terrace, Florida
33687-1764 USA**
Zip Country

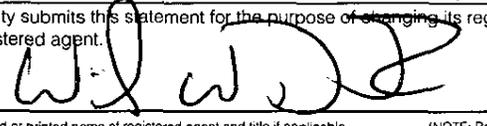
4. FEI Number **59-2974148** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**SURRENCY, TROY E
9917 39 SO
LITHIA FL 33547**

7. Name and Address of New Registered Agent
Name
**Daggett, William W.
11250 North 56th Street
Temple Terrace, Florida 33687** 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  DATE **4-29-03**

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

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

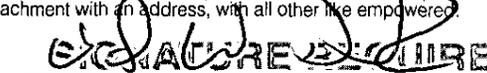
10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
P	ROMINE, DAVID	551-RD ST NW	WINTER HAVEN FL 33881	<input checked="" type="checkbox"/>
D	HEATHCOTE, I W	15 NW FIRST ST	FORT MEADE FL 33841	<input type="checkbox"/>
ST	SURRENCY, TROY	PO BOX 655	LITHIA FL 33547	<input checked="" type="checkbox"/>
D	URAVICH, PAUL	4202 E FLOWER AVE	TAMPA FL 33620	<input checked="" type="checkbox"/>
D	SEWELL, JIM	4211 N LOIS AVE	TAMPA FL 33614	<input type="checkbox"/>
D	BENNETT, WARREN	PO BOX 22287	TAMPA FL 33622	<input checked="" type="checkbox"/>

11. OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
P	A.L. Tony Velong	11250 North 56 th Street	Temple Terrace, Fl. 33617	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ST	William W. Daggett	11250 North 56 th Street	Temple Terrace, Fl., 33617	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V	Dorene Thomas	7700 59 th Street North	Pinellas Park, Fl. 33781	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	I. W. Heathcote	15 N.W. First Street	Fort Meade, Fl. 33841	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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:  **William W. Daggett 4-29-03 (813) 989-7027**

CR2E037 (10/02)