2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34346

FILED Apr 30, 2005 Secretary of State

Entity Name: FOUNDATION FOR LAW ENFORCEMENT OFFICERS ASSISTANCE, INC.

Current Principal Place of Business: New Principal Place of Business:

5013 GILBERT AVE TAMPA, FL 33615

Current Mailing Address: New Mailing Address:

5013 GILBERT AVE TAMPA, FL 33615

FEI Number: 59-3013069 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOGSTEN, JANET ANN 5013 GILBERT AVE TAMPA, FL 33615 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 HOGSTEN, JANET ANN,
 Name:
 HOGSTEN, JANET ANN,

 Address:
 5013 GILBERT AVE
 Address:
 5013 GILBERT AVE

 City-St-Zip:
 TAMPA, FL
 33515 US

Title: () Delete Title: (X) Change () Addition Name: O'FARRELL, CHRIS, Name: HOGSTEN, RALPH EDWAR, D Address: 6517 DOVEWOOD PL Address: 5013 GILBERT AVENUE City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33615 US

Title: D () Delete Title: O (X) Change () Addition

Name: GUSSE', PETER, Name: O'FARRELL, SUSAN LOR, ETTO

Address: 770 CUSTORD CLUBBLE BD.

Address: 6770 CEORGE BOAD.

 Address:
 79 GIFFORD CHURCH RD
 Address:
 6708 GEORGE ROAD

 City-St-Zip:
 SCHENECTADY, NY
 City-St-Zip:
 TAMPA, FL 33615 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JANET ANN HOGSTEN D 04/30/2005