

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N37849** (9)  
1. Corporation Name

**FORT WALTON BEACH LODGE NUMBER 44, FRATERNAL ORDER OF POLICE INC.**

Principal Place of Business P.O. BOX 965 FT WALTON BEACH FL 32549-0965	Mailing Address P.O. BOX 965 FT WALTON BEACH FL 32549-0965
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

**SPINELLA, STEPHEN**  
**1703 COLONIAL CT**  
**FT WALTON BEACH FL 32547**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>04/26/1990</b>	3a. Date of Last Report <b>09/06/1996</b>
4. FEI Number <b>59-3011625</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

10. Name and Address of New Registered Agent

81 Name <b>Tim Brown</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>3583 Buckhorn Dr</b>
83
84 City <b>Crestview</b>
85 Zip Code <b>FL 32536</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* **TIM BROWN** **OCTOBER 20 1997**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPINELLA, STEPHEN 1703 COLONIAL CT FT WALTON BCH FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD TIMOTHY BROWN 3583 Buckhorn Dr Crestview FL 32536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, TIMOTHY 3583 BUCKHORN DRIVE CRESTVIEW FL 32536	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D STEPHEN SPINELLA 105 Wright Pkwy #24 Fort Walton Beach FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERRY, ROSEMARIE P.O. BOX 943, N/A FT WALTON BEACH FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D GENE HOLLAND 671 Merioneth Fort Walton Beach FL 32548
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<b>300002328543-7</b> <b>-10/23/97-01106-016</b> <b>*****75.00 *****75.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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: *[Signature]* **TIMOTHY BROWN**  
SIGNATURE REQUIRED

Sept 10 1997 682 6426

FILED

97 OCT 22 AM 10:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CR2E037 (4/97)