

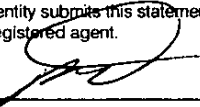
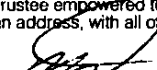


FILED
Jun 11, 2008 8:00 am
Secretary of State

06-11-2008 90001 004 ****61.25

DOCUMENT # N41773						06-11-2008 90001 004 ****61.25	
1. Entity Name BOCA RATON POLICE ATHLETIC LEAGUE, INC.							
Principal Place of Business 100 NW 2 AVE BOCA RATON, FL 33432		Mailing Address 100 NW 2 AVE BOCA RATON, FL 33432					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				06032008 Chg-NP CR2E037 (12/06)	
City & State		City & State				4. FEI Number 65-0248843	
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent MCGARRY, MATT OFC 100 NW 2 AVE BOCA RATON, FL 33432				7. Name and Address of New Registered Agent Name Officer Robert DeNeve Street Address (P.O. Box Number is Not Acceptable) 100 NW 2nd Ave City Boca Raton FL Zip Code 33432			
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  (NOTE: Registered Agent signature required when reinstating) 6/3/08 (DATE)							
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		D FOX, LEO 133 EAST BOCA RATON ROAD BOCA RATON, FL 33432 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		President Nancy Snelder 100 NW 2nd Ave Boca Raton, FL 33432 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		D MCGARRY, MATT 100 NW 2 AVE BOCA RATON, FL 33432 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		Executive Director Robert DeNeve 100 NW 2nd Ave Boca Raton, FL 33432 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		Officer Alan Newtham 100 NW 2nd Ave Boca Raton, FL 33432 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		Officer Constance Scott 100 NW 2nd Ave Boca Raton, FL 33432 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		Officer Robert DeNeve Tom Vladimir 100 NW 2nd Ave Boca Raton, FL 33432 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		Officer Erica Reuter 100 NW 2nd Ave Boca Raton, FL 33432 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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: 				6/3/08 561-350-3505			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #			