

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42787

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** EAST HILLSBOROUGH LAW ENFORCEMENT APPRECIATION ASSOCIATION, INC.

**Current Principal Place of Business:**

P.O. BOX 4807  
PLANT CITY, FL 33564 US

**New Principal Place of Business:**

106 GRANT STREET  
PLANT CITY, FL 33563 US

**Current Mailing Address:**

P.O. BOX 4807  
PLANT CITY, FL 33564 US

**New Mailing Address:**

4807  
PLANT CITY, FL 33564

**FEI Number:** 59-3061567

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIBBS, DOUG  
106 GRANT STREET  
PLANT CITY, FL 33563 US

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

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:**

Title: D ( ) Delete  
Name: SPARKMAN, CHRIS  
Address: 702 TILLMAN PLACE  
City-St-Zip: PLANT CITY, FL 33563

Title: VP ( ) Delete  
Name: WETHERINGTON, LANE  
Address: P.O. BOX 4807  
City-St-Zip: PLANT CITY, FL 33564

Title: S ( ) Delete  
Name: JOYCE MALONEY  
Address: 1303 N PARK RD  
City-St-Zip: PLANT CITY, FL 33563

Title: T ( ) Delete  
Name: STEPHEN, ROBERT  
Address: 703 S. EVERS ST.  
City-St-Zip: PLANT CITY, FL 33563

Title: D ( ) Delete  
Name: DAVIS, COLEMAN  
Address: 703 S EVERS STREET  
City-St-Zip: PLANT CITY, FL 33563

Title: P ( ) Delete  
Name: GIBBS, DOUG  
Address: 106 GRANT STREET  
City-St-Zip: PLANT CITY, FL 33563

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: PASSMORE, MARSHA  
Address: 106 GRANT STREET  
City-St-Zip: PLANT CITY, FL 33563

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DOUG GIBBS

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date