

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N42787

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