

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50903

FILED
Feb 19, 2004
Secretary of State**Entity Name:** FRATERNAL ORDER OF POLICE, NORTH OKALOOSA LODGE #146, INC.**Current Principal Place of Business:**P O BOX 476
CRESTVIEW, FL 32536**New Principal Place of Business:****Current Mailing Address:**P O BOX 476
CRESTVIEW, FL 32536**New Mailing Address:****FEI Number:** 59-3043752**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WARD, LARRY
OKALOOSA COUNTY SHERIFF'S OFFICE
1250 N. EGLIN PARKWAY
SHALIMAR, FL 32579 US**Name and Address of New Registered Agent:**WARD, LARRY W PRES.
OKALOOSA COUNTY SHERIFF'S OFFICE
1250 N. EGLIN PARKWAY
SHALIMAR, FL 32579 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: LARRY W. WARD

02/19/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: WARD, LARRY
Address: 4388 JACK POWELL ROAD
City-St-Zip: CRESTVIEW, FL 32539Title: VD () Delete
Name: MANN, DENNIS
Address: 5533 MONTEREY ROAD
City-St-Zip: CRESTVIEW, FL 32539Title: SD () Delete
Name: PEACOCK, KELI
Address: 3006 LASALLE COURT
City-St-Zip: CRESTVIEW, FL 32539Title: TD () Delete
Name: HUDSON, CECIL M
Address: 149 STEEPLECHASE DRIVE
City-St-Zip: CRESTVIEW, FL 32539Title: T () Delete
Name: GRIFFITH, DALE
Address: 5921 OAKCREST DRIVER
City-St-Zip: CRESTVIEW, FL 32539**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: () 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 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: LARRY W. WARD

PRES

02/19/2004

Electronic Signature of Signing Officer or Director

Date