

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000167

FILED
May 14, 2009
Secretary of State

Entity Name: FRATERNAL ORDER OF POLICE ASSOCIATES OF FLORIDA, INC.

Current Principal Place of Business:

P.O. BOX 708
BOYNTON BEACH, FL 334250708 US

New Principal Place of Business:

1112 N FEDERAL HWY
BOYNTON BEACH, FL 33435 US

Current Mailing Address:

P.O. BOX 708
BOYNTON BEACH, FL 334250708 US

New Mailing Address:

FEI Number: 65-0411575 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

POWELL, LLOYD
1112 N. FEDERAL HWY
BOYNTON BCH, FL 33435 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POWELL, LLOYD
Address: P.O. BOX 700 N/A
City-St-Zip: BOYNTON BEACH, FL

Title: VD () Delete
Name: ROSS, VINCENT C
Address: 204 BRAZILLAN AVENUE 218
City-St-Zip: PALM BEACH, FL

Title: STD () Delete
Name: POWELL, KURT G
Address: P.O. BOX 708 N/A
City-St-Zip: BOYNTON BEACH, FL 334250708

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:

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: LLOYD POWELL

PRES

05/14/2009

Electronic Signature of Signing Officer or Director

Date