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95 MAY -1 AM 10:41

TALLAHASSEE, FLORIDA

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mayham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000001969 (5)

1. Corporation Name

STATE POLICE OFFICERS COALITION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
33055 CAPITAL CIR NE SUITE 204 TALLAHASSEE FL 32308	PO BOX 14745 TALLAHASSEE FL 32317-4745

3. Date Incorporated or Qualified 04/30/1993	3a. Date of Last Report 05/01/1994
4. FEI Number 59-3178579	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 1523-C Killearn Center	26
22 Tallahassee, FL 32308	27
23	28
24 32308	25 Leon
29	30

9. Name and Address of Current Registered Agent

**BURNHAM, DARRELL E
6661 MAN O'WAR TRAIL
TALLAHASSEE FL 32308**

10. Name and Address of New Registered Agent

81 Name	Burnham, Darrell E.
82 Street Address (P.O. Box Number is Not Acceptable)	3711 Shamrock W. 135G
83	
84 City	Tallahassee
85 State	FL
86 Zip Code	32308

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when registering.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	P O <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURNHAM, DARRELL E	12 NAME	Burnham, Darrell E.
STREET ADDRESS	6661 MAN O'WAR TRAIL	13 STREET ADDRESS	3711 SHAMROCK W., 135-G
CITY - ST - ZIP	TALLAHASSEE FL 32308	14 CITY - ST - ZIP	Tallahassee, Fl. 32308
TITLE	S	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEE C. BISHOP,	22 NAME	
STREET ADDRESS	P.O. BOX 185 N/A	23 STREET ADDRESS	400001482394
CITY - ST - ZIP	LEE FL 32059	24 CITY - ST - ZIP	-05/10/95--01029--018
TITLE	D	31 TITLE	****130-00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAM H. NORRIS	32 NAME	
STREET ADDRESS	455 FULWOOD BLVD	33 STREET ADDRESS	
CITY - ST - ZIP	TIFTON GA GA 31794	34 CITY - ST - ZIP	
TITLE	I	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARD D. HURST	42 NAME	
STREET ADDRESS	500 SE SULLIVAN ST	43 STREET ADDRESS	
CITY - ST - ZIP	MADISON FL 3234-0	44 CITY - ST - ZIP	
TITLE	I	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALTON RENEW	52 NAME	
STREET ADDRESS	P.O. BOX 972	53 STREET ADDRESS	
CITY - ST - ZIP	CHATTACHOOEE FL 32324	54 CITY - ST - ZIP	5-1-95 T.G.
TITLE	D	61 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Fery Larkin Lee, Jr.	62 NAME	Fery Larkin Lee, Jr.
STREET ADDRESS	3740 Forsythe Way	63 STREET ADDRESS	3740 Forsythe Way
CITY - ST - ZIP	Tallahassee, Fl. 32308	64 CITY - ST - ZIP	Tallahassee, Fl. 32308

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes, and that my name appears in Block 12 or (Block 13) if changed, or on an attachment with an address

SIGNATURE: *Darrell E. Burnham* 904/668-2565
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/21/95
Darrell E. Burnham, President