

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2007 8:00 am
Secretary of State

08-17-2007 90029 010 ****61.25

DOCUMENT # N94000001248 1. Entity Name POLK ASSOCIATION OF CODE ENFORCEMENT, INC.			
Principal Place of Business 228 S MASSACHUSETTS AVE LAKELAND, FL 33809 US		Mailing Address P.O. BOX 2277 WINTER HAVEN, FL 33881 US	
2. Principal Place of Business - No P.O. Box # Polk Co. BOCC		3. Mailing Address P.O. Box 9005	
Suite, Apt. #, etc. 330 W. Church St.		Suite, Apt. #, etc. Drawer CS03	
City & State Bartow, Florida		City & State Bartow, Florida	
Zip 33830		Zip 33831-9005	
Country USA		Country USA	
4. FEI Number 59-3077396		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DEHNE, JIM 228 S MASSACHUSETTS AVE LAKELAND, FL 33809		7. Name and Address of New Registered Agent Name <u>Stanley E. Ducher</u> Street Address (P.O. Box Number is Not Acceptable) <u>P.O. Box 9005, Drawer CS03</u> <u>330 W. Church Street</u> City <u>Bartow</u> FL <u>33830</u>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u>STAN DUCHER</u> <small>Signature, typed or printed name of registered agent and title if applicable</small>		<u>Stan Ducher</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
DATE <u>8/14/07</u>		DATE	
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DEHNE, JIM 228 S MASSACHUSETTS AVE LAKELAND, FL 33801	<input type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THOMPSON, DANNY 225 S MASSACHUSETTS AVE LAKELAND, FL 338019	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>R. Brian Lewis</u> <u>3610 Drane Field Rd.</u> <u>Lakeland FL 33860</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FENTON, AUTUM P.O. BOX 2277 BARTON, FL 33881	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>Autumn M. Fenton</u> <u>P.O. Box 9005, Drawer CS03</u> <u>Bartow, FL 33831-9005</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BERG, ALLEN P.O. BOX 2227 WINTER HAVEN, FL 33881	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>Kathleen J. Heftin</u> <u>P.O. Box 9005, Drawer CS03</u> <u>Bartow, FL 33831-9005</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stanley E. Ducher P.O. Box 9005, Drawer CS03 Bartow, FL 33831-9005	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stanley E. Ducher P.O. Box 9005, Drawer CS03 Bartow, FL 33831-9005	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>R. Brian Lewis - President</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>8/10/07</u> Daytime Phone # <u>863-831-6258</u>	