

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003710

FILED
Jan 20, 2006
Secretary of State

Entity Name: ORMOND BEACH CITIZEN POLICE ACADEMY ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

170 W GRANADA BLVD
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

851 MARVIN RD
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 59-3313841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHIESON, LARRY
170 W GRANADA BLVD
ORMOND BEACH, FL 32174 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: PD () Delete
Name: DURRUA, AUDREY
Address: 180 A CARDINAL DRIVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: VD () Delete
Name: TRUSTY, ROY
Address: 144 ORMOND PARKWAY
City-St-Zip: ORMOND BEACH, FL 32176

Title: TD () Delete
Name: WILSON, EDITH
Address: 851 MARVIN RD
City-St-Zip: ORMOND BEACH, FL 32176

Title: SD () Delete
Name: PORTA, JOSEPH
Address: 134 SETON TRAIL
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: WILSON, CHARLES B
Address: 37 MISTYFALLS DR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: REECE, JANET
Address: 11 CHIPPINGWOOD LN.
City-St-Zip: ORMOND BEACH, FL 32176

I hereby certify that the information supplied with this filing does not qualify for the 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: EDITH WILSON

TD

01/20/2006

Electronic Signature of Signing Officer or Director

Date