

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004653

FILED  
May 12, 2009  
Secretary of State

**Entity Name:** CODE ENFORCEMENT OFFICERS ASSOCIATION OF PALM BEACH COUNTY, FLORIDA, INC.

**Current Principal Place of Business:**

2300 N. JOG RD.  
ATTN: DEBORAH WIGGINS  
WEST PALM BEACH, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 19062  
WEST PALM BEACH, FL 334169062

**New Mailing Address:**

POST OFFICE BOX 19062  
WEST PALM BEACH, FL 33416

**FEI Number:** 65-0886077      **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:**

SHENOY RAGHURAJ, PRES. OF CEOPBC  
2300 N. JOG RD  
WEST PALM BEACH, FL 33411      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: RAGHURAJ, SHENOY  
Address: 2300 N. JOG RD.  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VPD      ( ) Delete  
Name: BRUSCELL, MICHAEL SR  
Address: 318 S. DIXIE HWY.  
City-St-Zip: LANTANA, FL 33462

Title: SD      ( ) Delete  
Name: DRAKE, CINDY  
Address: 12794 W. FOREST HILL BLVD., STE. 10  
City-St-Zip: WELLINGTON, FL 33414

Title: TD      ( ) Delete  
Name: WIGGINS, DEBORAH  
Address: 2300 N. JOG RD.  
City-St-Zip: WEST PALM BEACH, FL 33411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD      (X) Change ( ) Addition  
Name: CARACCIO, LAWRENCE  
Address: 2300 N JOG RD  
City-St-Zip: WEST PALM BEACH, FL 33411

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: DEBORAH WIGGINS

TD

05/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date