FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N4500000 648

The Commission for Florida Law Enforcement Accreditation, Inc.

Principal Place of Business Mailing Address pg/sfz

Priorida Sheriffs Association 2617 Mahan Drive Tallahassee, Florida 32308					***51.25			
					3. Date Incorporated or Qualified Feb. +9, 1995	3a. Date of Last	Report	
2. Principal Place of Busi	ness	2a. Mailing Address 26			4. F5 9 - 3 3 0 8 0 4 0	 -	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc				¢0.75	Not Applicable	
22							75 Additional e Required	
City & State 23 Zip		City & State			6. Election Campa gn Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24	Country Zip Country 25 29 30			8. This corporation has fiability for intangible tax under s. 199.032, Florida Statutes				
9. Name	and Address of Current I	Registered Agent			10. Name and Address of New Reg	gistered Agent		
			6	1 Name				
J.M. "Buddy" Phillips . 2617 Mahan Drive				82 Street Address (P.O. Box Number is Not Acceptable) 83				
Tallahas	see, Florida	32308	8	3				
•			8-	4 City		EI 85 Zip	Code	
11. Pursuant to the provis	ions of Sections 617.0502 a	and 617 1508, Florida Stati	utes, the abo	 ve-named c	corporation submits this statement for the proporation's board of directors. I hereby accept	Uronse of changing	ite registered	
12. TITLE NAME STREET ADDRESS	OFFICERS AND D	DELETE	13. 11 TITLE 12 NAME	: }	Director Judge W. Douglas B	☐ Change		
STREET ADDRESS			13 STREE	T ADDRESS	315 Court Street,	Room 484		
CITY - ST - ZIP			14 CITY -	T ADDRESS ST-ZIP	315 Court Street, 1 Clearwater, FL 34	Room 484 616	•	
CITY-ST-ZIP TITLE		DELETE	14 CITY - 21 TITLE	ST-ZIP	315 Court Street, 1 Clearwater, FL 340 Director	Room 484 616	Addition	
CITY - ST - ZIP TITLE NAME		☐ DELETE	14 CITY- 21 TIFLE 22 NAME	T ADDRESS ST-ZIP	315 Court Street, 1 Clearwater, FL 340 Director Chief William B. Bo	Room 484 616 Change erger	Addition	
CITY - ST - ZIP LITTLE NAME STREET ADDRESS		☐ DELETE	14 CITY- 21 TILE 22 NAME 23 STREE	ST-ZIP	315 Court Street, 1 Clearwater, FL 340 Director Chief William B. Bo 17050 NE 19th Avens	Room 484 616 Change erger ue		
CITY-ST-ZIP TITLE NAME STREET ADDRESS C-TY-ST-ZIP			1 4 CITY- 2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY-	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	315 Court Street, 1 Clearwater, FL 340 Director Chief William B. Bo 17050 NE 19th Avena North Miami Beach,	Room 484 616 Change erger ue FL 3316	52	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	14 CITY- 21 TITLE 22 NAME 23 STREE 24 CITY- 31 TITLE	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	315 Court Street, 1 Clearwater, FL 340 Director Chief William B. Bo 17050 NE 19th Avena North Miami Beach, Director	Room 484 616 Change erger ue FL 3316		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			14 CITY- 21 TITLE 22 NAME 23 STREE 24 CITY- 31 TITLE 32 NAME	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	315 Court Street, 1 Clearwater, FL 340 Director Chief William B. Bo 17050 NE 19th Avena North Miami Beach, Director Chief George M. Feb	Room 484 616 Change erger ue FL 3316	52	
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corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and ed, or on an attachment with an address.

MAR 2 5 1998 made under oath; that I am a that my name appears in Blo ged, or on an attachment with an address.

SIGNATURE:

ED NAME OF SIGNING OFFICER OR DIRECTOR

>	FILE NOW: FILE	ING FEE I	Additional Sheet		
COF ANNU	NONPROFIT DRPORATION NUAL REPORT 1996 FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS			Additional Sheet Pg. 2072	
DOCUI 1. Corporation	MENT # Commission for		Law E	nforceme	
Principal Place F10 261	reditation, Inc orida Sheriffs A 7 Mahan Drive lahassee, Florid	Mailing Addr SSOCIATIO	ess O n		3. Date Incorporated or Qualified Feb. 9, 1995
2. Principal Place of Business		2a. Mailing Address			4. F5 9 3308040 Applied For
Suite Apt	# etc	Suite, Apt	#. etc		S. Certificate of Status Desired S8.75 Additional
Cdy & State		City & State			Fee Required S. Election Campaign Financing S.00 May Be
Z _I p 14	Country 25 9. Name and Address of Currer	Z _I p		Country 10	Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199 032 Florida Statutes Yes No
11. Pursuant to	lahassee, Florid o the provisions of Sections 617 050 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 617 1508, Fig			Corporation submits this statement for the purpose of changing its registered location's board of directors. Thereby accept the appointment as registered
SIGNATURE _	Signature, type our printed name of registere or age	mi and the Happicable	OVOTE 6	Registered Agent is gnature	required where reinstating) CATE
12.	OFFICERS AN			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE .	1 1 TITLE 12 NAME 13 STREET ADDRESS 1 4 CHY-ST-ZIP	Director Change Addition Sheriff Everett S. Rice 10750 Ulmerton Road Largo, FL 34648-1798
TITLE NAME STREET ADDRESS CITY+ST-ZIP			DELETE	2 1 TITLE 2 2 NAME	Director Commissioner Ray Sansom 1804 Lewis Turner Blvd., Suite 102 Ft. Walton Beach, FL 32548
TITLE NAME STREET ACGRESS CITY+ST-ZIP			DELETE	3 1 TITLE	Ft. Walton Beach, FL 32548 Director
TITLE NAME STREET ADDRESS CITY - ST - ZIP		U	DELETE	4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS	Director Change K Addition Sheriff Richard H. Worch, Jr. 25500 Airport Road Punta Gorda, FL 33950-5797
TITLE NAME STREET ADDRESS CITY+ST-ZIP			DELETE	51 TITLE 52 NAME 53 STREET ADDRESS	Director Change X Addition Mr. Richard Quigley 301 South Ridgewood Avenue Daytona Beach, FL 32114

DELETE

TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

61 TITLE

62 NAME

6 3 STREET ADDRESS 6 4 CITY - ST - ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

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 119.07(3)(k). Frorida Statutes I further certify that the information indicates 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 pirector 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 / 2 ar Biock / 13 inchanged, or on an attachment with an address. MAR 2 5 1996

___ Change

Addition