

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001832

FILED
Jan 10, 2007
Secretary of State

Entity Name: APOPKA CITIZEN POLICE ACADEMY ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

112 E. 6TH ST.
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

112 E. 6TH ST.
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-3325253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCQUEEN, MARILYN A.U.
11 EAST ALBATROSS STREET
APOPKA, FL 32712 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: LAURENDEAU, LINDA
Address: 1785 NORDIC COURT
City-St-Zip: APOPKA, FL 32712

Title: SD () Delete
Name: SACKS, MARGE
Address: 1334 CHEDON COURT
City-St-Zip: APOPKA, FL 32712

Title: TD () Delete
Name: MCQUEEN, MARILYN
Address: 11 EAST ALBATROSS ST.
City-St-Zip: APOPKA, FL 32712

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: BOD () Change (X) Addition
Name: SACKS, RALPH
Address: 1334 CHEDON COURT
City-St-Zip: APOPKA, FL 32712

Title: BOD () Change (X) Addition
Name: HLINAK, EDWARD
Address: 1065 ERROL PARKWAY
City-St-Zip: APOPKA, FL 32712

Title: BOD () Change (X) Addition
Name: HARSHMAN, KENNETH
Address: 22 EAST THRUSH STREET
City-St-Zip: APOPKA, FL 32712

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: MARILYN A. USTLER MCQUEEN

TD

01/10/2007

Electronic Signature of Signing Officer or Director

Date