

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000001832

**FILED**  
**Jan 05, 2011**  
**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:**

112 E. 6TH STREET  
APOPKA, FL 32703

**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:**

GREENE, JAMES W.  
444 LANARKSHIRE PLACE  
APOPKA, FL 32712 US

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: JAMES W. GREENE

01/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HOOKS, STEVE  
Address: 876 HICKORY KNOLL CT.  
City-St-Zip: APOPKA, FL 32712

Title: S  
Name: GARNET UNRUE, GERI  
Address: 529 HAWKINS CR.  
City-St-Zip: APOPKA, FL 32703

Title: T  
Name: GREENE, JAMES W.  
Address: 444 LANARKSHIRE PLACE  
City-St-Zip: APOPKA, FL 32712

Title: V  
Name: SURIFF, MARV  
Address: 1346 CHEBAN CT.  
City-St-Zip: APOPKA, FL 32712

I hereby 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 all other like empowered.

SIGNATURE: JAMES W. GREENE

T

01/05/2011

Electronic Signature of Signing Officer or Director

Date