2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003476

FILED Jan 08, 2008 Secretary of State

Entity Na	me: ORANGE	COUNTY POLICE ATHLETI	C LEAGUE	E, INC.		
Current Principal Place of Business:				New Principal Place of Business:		
OCSO COMMUNITY POLICING DIV. 2500 W. COLONIAL DR. ORLANDO, FL 32804				OCSO UNIFORM PATROL DIV. 2500 W. COLONIAL DR. ORLANDO, FL 32804		
Current Mailing Address:				New Mailing Address:		
OCSO COMMUNITY POLICING DIV. 2500 W. COLONIAL DR. ORLANDO, FL 32804				OCSO UNIFORM PATROL DIV. 2500 W. COLONIAL DR. ORLANDO, FL 32804		
FEI Number	: 59-3094368	FEI Number Applied For ()	FEI Nun	nber Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:		Name and Address	of New Registered Agent:	
GIDUS, ANDY OCSO COMMUNITY POLICING DIVISION 2500 W. COLONIAL DR. ORLANDO, FL 32804 US				GIDUS, ANDY OCSO UNIFORM PATROL DIVISION 2500 W. COLONIAL DR. ORLANDO, FL 32804 US		
	e named entity e of Florida.	submits this statement for the	purpose o	f changing its registere	ed office or registered agent, or both,	
SIGNATURE:				01/08/2008		
Electronic Signature of Registered Agent				Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (GIDUS, ANDY 2500 W. COLC ORLANDO, FL			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DP (SALDANO, SAI 2500 W. COLC ORLANDO, FL	NIAL DR.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: Citv-St-Zip:	DTS (KUSHMER, BE 2500 W. COLO	NIAL DR.		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ANDY GIDUS D 01/08/2008