

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000000948

**FILED**  
**Jan 14, 2010**  
**Secretary of State**

**Entity Name:** POLICE AUXILIARY, CRESTVIEW, FLORIDA, INC.

**Current Principal Place of Business:**

321 W. WOODRUFF AVE  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

201 STILLWELL BOULEVARD  
CRESTVIEW, FL 32539

**Current Mailing Address:**

321 W. WOODRUFF AVE  
CRESTVIEW, FL 32536

**New Mailing Address:**

201 STILLWELL BOULEVARD  
CRESTVIEW, FL 32539

**FEI Number:** 59-3442283

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BROWN, JOHN J  
321 W. WOODRUFF AVE  
CRESTVIEW, FL 32536 US

**Name and Address of New Registered Agent:**

BROWN, JOHN J  
201 STILLWELL BOULEVARD  
CRESTVIEW, FL 32539 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: JOHN J. BROWN

01/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CPT  
Name: BROWN, JOHN J  
Address: 201 STILLWELL BOULEVARD  
City-St-Zip: CRESTVIEW, FL 32539

Title: LT  
Name: MACE, TERRY  
Address: 201 STILLWELL BOULEVARD  
City-St-Zip: CRESTVIEW, FL 32539

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: JOHN J. BROWN

CPT

01/14/2010

Electronic Signature of Signing Officer or Director

Date