

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005101

FILED
Apr 11, 2006
Secretary of State

Entity Name: FRATERNAL ORDER OF POLICE, DISTRICT FOUR, MEMORIAL FUND, INC.

Current Principal Place of Business:

3175 SOUTH CONGRESS AVE.
SUITE 103A
PALM SPRINGS, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

3175 SOUTH CONGRESS AVE.
SUITE 103A
PALM SPRINGS, FL 33461 US

New Mailing Address:

FEI Number: 31-1538605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS & CLOUGH
324 N. LAKE SIDE CT.
WEST PALM BEACH, FL 33407 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: DIR () Delete
Name: BURROUGHS, EDGAR E DIRECTO
Address: 421 DAVIS RD
City-St-Zip: PALM SPRINGS, FL 33461

Title: TD () Delete
Name: BONNEY, THOMAS
Address: 3175 SO CONGRESS AVENUE SUITE 103A
City-St-Zip: PALM SPRINGS, FL 33461

Title: SD () Delete
Name: LICATA, MICHAEL
Address: 3175 SO. CONGRESS AVENUE SUITE 103A
City-St-Zip: PALM SPRINGS, FL 33461

Title: VD () Delete
Name: MARCHMAN, HENRY
Address: 691 SNEAD CIR.
City-St-Zip: WEST PALM BEACH, FL 33413

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

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: EDGAR E. BURROUGHS

DIR

04/11/2006

Electronic Signature of Signing Officer or Director

_____ Date