2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003256

FILED Apr 23, 2007 Secretary of State

Entity Name: LAW ENFORCEMENT EMERALD SOCIETY OF SOUTH FLORIDA, INC.

Current P	rincipal Plac	e of Business:	New Principal Plac	New Principal Place of Business:	
10031 N.W MIAMI, FL	/. 27TH TERF 33172	RACE			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O. BOX : MIAMI, FL					
FEI Number:	65-0773129	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
HAYES, SI 10031 N.W MIAMI, FL	I. 27 TERRAG				
	named entity e of Florida.	submits this statement for the p	urpose of changing its register	red office or registered agent, or both,	
SIGNATURE:					
	Electro	nic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (DELANO, KEI' PO BOX 2268 MIAMI, FL 33	22	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	REILLY, PATE PO BOX 3057		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (JAMES, MOYE 4974 SW 102 COOPER CIT	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PASSERO, RO 1901 N. ATLAI) Delete DGER NTIC BLVD. #S513 RDALE, FL 33305	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (HINMAN, SHA' 1849 CAPESII WELLINGTON	DE CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (HAYES, SEAN 10031 NW 27' MIAMI, FL 33	TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
l b b				as everytian stated in Chanter 110	

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: KEITH DELANO PD 04/23/2007