2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2011
Secretary of State

DOCUMENT# N98000001644

Entity Name: TREASURE COAST LAW ENFORCEMENT, INC.

Current Principal Place of Business:

962 S.W. HAMBERLAND AVENUE
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1277
PALM CITY, FL 34991

New Mailing Address:

FEI Number: 59-3563917 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCANDLESS, BRIAN
962 S.W. HAMBERLAND AVENUE
PORT ST. LUCIE, FL 34953 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: PD
Name: MCCANDLESS, BRIAN
Address: 962 S.W. HAMBERLAND AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: SVPD
Name: PRYOR, ROBERT
Address: 800 SE MONTEREY RD.
City-St-Zip: STUART, FL 34994

Title: VPD
Name: GANNON, KEVIN
Address: 800 SE MONTEREY RD.
City-St-Zip: STUART, FL 34994

Title: SD
Name: HARMER, THOMAS
Address: 830 SE MARTIN LUTHER KING BLVD.
City-St-Zip: STUART, FL 34990

Title: TD
Name: MIDDLETON, MARK
Address: 800 SE MONTEREY RD.
City-St-Zip: STUART, FL 34994

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: BRIAN MCCANDLES PD 02/09/2011

Electronic Signature of Signing Officer or Director — Date