FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

3409 INDUSTRIAL 27TH ST

FLORIDA Country

1999 DOCUMENT # N98000003785

STRATEGIC POLICIES INSTITUTE, INC.

3409 INDUSTRIAL 27TH ST

FLORIDA

Country

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

27 N/A

Suite, Apt. #, etc.

FORT PIERCE

3409 INDUSTRIAL 27TH STREET FT. PIERCE FL 34946

2. Principal Place of Business

Suite, Apt. #, etc. N/A

FORT PIERCE

City & State

22

3409 INDUSTRIAL 27TH STREET FT. PIERCE FL 34946

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90128 001 ****70.00

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3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

06/26/1998

~65~0846005

4. FEI Number

34946	25 USA	29 34946	30 USA		Trust Fund Cor	tribution	<u> </u>	Added to	Fees	
	9. Name and Address of Current I	Registered Agent			10. Name and Add	dress of New R	egistered Aç	ent		
DENMON.	FFLIX		81 82	Name	N/A Address (P.O. Box Numbe	r is Not Accepta	ble)			
3409 INDUSTRIAL 27TH STREET					N/A					
FT. PIERCE FL 34946					N/A					
r is rithic	DE 1 E 34840		-	0:5	МЧ			85 Zip C	ode	
			84	1	N/A		FL_			
office or re	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was	authorized by	the corpo	corporation submits this st pration's board of directors	atement for the lacep	purpose of cl t the appoint	nanging its r ment as reg	egistered istered	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable (NO)	É: Registered Age	nt signature r	equired when reinstating)		DATE		 [
12.	OFFICERS AND		13.	•	ADDITIONS/CH	ANGES TO OFF	ICERS AND	DIRECTOR	RS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE		D			Change	Addition	
NAME	MURPHY, CHARLES DR.		1.2 NAME		DENMON, DAVID	ANDREW			′	
STREET ADDRESS	21 AMERICAN BLVD.		1.3 STREE	TADDRESS	3409 INDUSTRI		STREET			
CITY-ST-ZIP	ROSSVILLE GA 30741		1.4 CITY- S	T- ZIP	FORT PIERCE,		34946			
TITLE	VPD	☐ DELETE	2.1 TITLE		NANCY MURPHY	- LUITEDA	01010	Change	Addition	
NAME	LAROSE, JAMES P		2.2 NAME		21 AMERICAN B	MD			1	
STREET ADDRESS	2404 LAKESIDE DRIVE		2.3 STREE	T ADDRESS	ROSSVILLE, GA					
CITY-ST-ZIP	FREDERICK MD 21702		2.4 CITY-	ST- ZIP	NOSSVILLE, OA	30741				
TITLE	SD	☐ DELETE	3.1 TITLE		KRISTEN J. LA	PUSE		Change	Addition	
NAME	DENMON, SHERRY		3.2 NAME		2404 LAKESIDE		•		·)	
STREET ADDRESS	3409 INDUSTRIAL 27TH STREET	•	3.3 STREE	TADORESS	FREDERICK, MD				•	
CITY-ST-ZIP	FT. PIERCE FL 34946	•	3.4. CITY-	ST-ZIP	FREDERICK, NO	21/02				
TITLE	TD	☐ DELETE	4.1 TITLE					Change	Addition	
NAME	DENMON, FELIX		4.2 NAME							
STREET ADDRESS	3409 INDUSTRIAL 27TH STREET		4.3 STREE	T ADDRESS						
CITY-ST-ZIP	FT. PIERCE FL 34946		4.4 CITY-5	T-ZIP						
TITLE	D	☐ DELETE	5.1 TITLE					Change	Addition	
NAME	MURPHY, RONALD		5.2 NAME							
STREET ADDRESS	21 AMERICAN BLVD.		5.3 STREE	TADDRESS						
CITY-ST-ZIP	ROSSVILLE GA 30741		5.4 CITY-8	T-ZIP						
TITLE	D	☐ DELETE	6.1 TITLE					Change	☐ Addition	
NAME	waters, John Dr.		6.2 NAME)				J	
STREET ADDRESS	1815 UNION AVENUE		6.3 STREE	T ADDRESS						
CITY-ST-ZIP	CHATTANOOGA TN 37404		6.4 CITY-5							
14. I hereby o	certify that the information supplied with	this filing does not qualify t	or the exemp	ion stated	d in Section 119.07(3)(i), F	lorida Statutes. I	further certif	y that the in	formation	

indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

JANUARY 1, 1999

561-595-6940

CR2E037 (11/98)

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable