

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003785

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: STRATEGIC POLICIES INSTITUTE, INC.

## Current Principal Place of Business:

202 CAPITAL LANE  
FOREST, VA 24551

## New Principal Place of Business:

104A NORTHWYND CR.  
LYNCHBURG, VA 24502

## Current Mailing Address:

202 CAPITAL LANE  
FOREST, VA 24551

## New Mailing Address:

104A NORTHWYND CR.  
LYNCHBURG, VA 24502

FEI Number: 65-0846005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DENMON, DREW  
3989 S.W. JARMER RD  
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 ( ) Delete  
Name: MURPHY, CHARLES DR.  
Address: 202 CAPITAL LANE  
City-St-Zip: FOREST, VA 24551

Title: D ( ) Delete  
Name: DEL, HAMILTON SR  
Address: 7003 RIVER RUN DR  
City-St-Zip: CHATTANOOGA, TN 37416

Title: D ( ) Delete  
Name: BROWN, CHAD LT  
Address: 2005 W BEVERLY ST  
City-St-Zip: STAUNTON, VA 24401

Title: D ( ) Delete  
Name: PRENCIPE, JIM  
Address: 2014 CONCORD RD NORTH  
City-St-Zip: CHATTANOOGA, TN 37421

Title: D ( ) Delete  
Name: MURPHY, RONALD  
Address: 14090 BIG CREST LANE #208  
City-St-Zip: WOODBRIDGE, VA 22191

Title: D ( ) Delete  
Name: FRANCIS, GAIL  
Address: 1809 E 14TH ST  
City-St-Zip: CHATTANOOGA, TN 37404

## 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: D (X) Change ( ) Addition  
Name: PRENCIPE, JIM  
Address: 2904 SOUTH 13TH, APT 202  
City-St-Zip: ARLINGTON, VA 22206

Title: D (X) Change ( ) Addition  
Name: MURPHY, RONALD  
Address: 3600 OLD FOREST RD #119  
City-St-Zip: LYNCHBURG, VA 24501

Title: D (X) Change ( ) Addition  
Name: RICK, WILLIAMS  
Address: 5612 JAMES AVE, APT 223A  
City-St-Zip: FORT WORTH, TX 76134

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES A. MURPHY

PD

01/16/2009

Electronic Signature of Signing Officer or Director

Date