

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90152 025 ****61.25

DOCUMENT # N98000004522

1. Entity Name
NORTH MIAMI POLICE OFFICERS' ASSOCIATION, INC.



Principal Place of Business
**N. MIAMI POLICE DEPT.
700 NE 124TH ST.
N. MIAMI FL 33161**

Mailing Address
**N. MIAMI POLICE DEPT.
700 NE 124TH ST.
N. MIAMI FL 33161**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State

3. Mailing Address
Suite, Apt. #, etc.
City & State

4. FEI Number **65-0845956**
Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**JOHNSON, NIEL F
N. MIAMI POLICE DEPT.
700 NE 124TH ST.
N. MIAMI FL 33161**

7. Name and Address of New Registered Agent
Name **TIMOTHY W. LITTLEFIELD**
Street Address (P.O. Box Number is Not Acceptable) **NORTH MIAMI POLICE DEPARTMENT
700 N.E. 124 ST**
City **NORTH MIAMI** FL **33161**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **PRESIDENT TIMOTHY W. LITTLEFIELD** *Timothy W. Littlefield* 05-01-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR BAQUENDANO, PATRICIA 700 NE 124 ST N. MIAMI FL 33161	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR SIDD, WALTER 700 NE 124 ST N MIAMI FL 33161	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR JONES, STACINA 700 NE 124 ST N MIAMI FL 33161	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAYATO, JUAN 700 NE 124 ST N MIAMI FL 33161	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR CUEVAS, NEAL 700 NE 124 ST N MIAMI FL 33161	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCHLEMOVITZ, DAVID 700 NE 124 ST N MIAMI FL 33161	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC, TRS STEVEN T. UNMUTH 700 N.E. 124 ST. N. MIAMI FL. 33161	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR BARRY KOMZE 700 N.E. 124 ST. N. MIAMI FL. 33161	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR CHRIS HAWLEY 700 N.E. 124 ST N. MIAMI FL. 33161	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TIMOTHY LITTLEFIELD 700 N.E. 124 ST. N. MIAMI FL. 33161	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *STEVEN T. UNMUTH* **STEVEN T. UNMUTH** 04-17-03 305-897-0294
Signature, typed or printed name of signing officer or director Date Designation

01282810

CR2E037 (10/02)