

**NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90013 032 ****61.25

DOCUMENT # N99000001966
1. Entity Name
CHARLES B. "CHICK" AUTRY, COCOA BEACH LODGE #159, FRATERNAL ORDER OF POLICE, INC.



Principal Place of Business: **25 N. ORLANDO AVE. COCOA BEACH FL 32931**
Mailing Address: **P O BOX 320666 COCOA BEACH FL 32932-0666**



2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.

1st MOORE CR2E037 (10/05)

City & State: _____
Zip: _____ Country: _____

4. FEI Number: **59-3519651**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**STILES, CHARLIE
20 S ORLANDO AVE
COCOA BEACH FL 32931**

7. Name and Address of New Registered Agent
Name: **Donald F. Potenziani**
Street Address (P.O. Box Number is Not Acceptable): **20 S. Orlando Ave.**
City: **Cocoa Beach** FL Zip Code: **32931**

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: _____ (NOTE: Registered Agent signature required when reconstituting) DATE: _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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: PD NAME: STILES, CHARLIE STREET ADDRESS: 4345 ROSEHILL AVE CITY-ST-ZIP: TITUSVILLE FL 32780	<input checked="" type="checkbox"/> Delete
TITLE: VP NAME: CARROLL, JAMES STREET ADDRESS: 1224 ARNOLD DR CITY-ST-ZIP: MELBOURNE FL 32935	<input type="checkbox"/> Delete
TITLE: S NAME: ALDRIDGE, DANIEL STREET ADDRESS: 2260 WOODWIND TRL, # 130 CITY-ST-ZIP: MELBOURNE FL 32935	<input type="checkbox"/> Delete
TITLE: TD NAME: STOVER, LILLIE STREET ADDRESS: 2472 MERCURY DR CITY-ST-ZIP: COCOA FL 32926	<input type="checkbox"/> Delete
TITLE: Trustee NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: PD NAME: Donald F. Potenziani STREET ADDRESS: 2877 Sebastian Lane CITY-ST-ZIP: Melbourne, FL 329	<input checked="" type="checkbox"/> Change <input 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
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: Trustee NAME: Ricardo L. Colon STREET ADDRESS: 192 S.E. 3rd St. CITY-ST-ZIP: Satellite Beach, FL 32937	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: Chaplain NAME: Ann-Marie Llewellyn STREET ADDRESS: 113 Claibourne Ave. CITY-ST-ZIP: Satellite Beach, FL 32937	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *[Signature]* DANIEL R ALDRIDGE Sec - 13 Feb 06 - 221-751-7599

ATTACHMENT

40037443

~~#109900060966~~

Cocoa Beach

F.O.P. Lodge 159

P.O. Box 320666

Cocoa Beach, FL 32932

2006 Lodge Officers

President

Donald F. Potenziani

2877 Sebastian Lane

Melbourne, FL 32935

321-254-7993

Vice President

James O. Carroll

2811 Floridiane Ave.

Melbourne, FL 32935

321-255-5569

Secretary

Daniel R. Aldridge

2260 Woodwind Trail

Melbourne, FL 32935

321-751-7599

Treasurer

Lillie K. Stover

2472 Mercury Drive

Cocoa, FL 32926

321-636-5554

Trustee

Ricardo L. Colon

192 S.E. Third St.

Satellite Beach, FL 32937

321-779-0519

Chaplain

Ann:Marie Llewellyn

113 Clairbourne Ave

Satellite Beach, FL 32937

321-779-2319