

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005134

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: THE PINELLAS PARK CITIZENS' POLICE ACADEMY ALUMNI ASSOCIATION, INC.

**Current Principal Place of Business:**

7700 59TH ST  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1100  
PINELLAS PARK, FL 337801100

**New Mailing Address:**

7994 POWDERHORN CIRCLE  
LARGO, FL 33773

FEI Number: 59-3637559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WAGGONER, BOB  
7994 POWDERHORN CIR  
LARGO, FL 33773 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: P ( ) Delete  
Name: WAGGONER, BOB  
Address: 7990 POWDER HORN CIR  
City-St-Zip: LARGO, FL 33773

Title: D ( ) Delete  
Name: FEDER, KAREN  
Address: 3200 74 AVE N 23  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: WAGGONER, BOB  
Address: 7994 POWDERHORN CIR.  
City-St-Zip: LARGO, FL 33773

Title: D ( ) Delete  
Name: JOHNSON, PATRICIA  
Address: 10542 OAKHAVEN DR  
City-St-Zip: PINELLAS PARK, FL 33782

Title: VP ( ) Delete  
Name: DELONG, WILLIAM R  
Address: 6252 68TH AVE N  
City-St-Zip: PINELLAS PARK, FL 33781

Title: T ( ) Delete  
Name: WAGGONER, BEVERLY  
Address: 7994 POWDERHORN  
City-St-Zip: LARGO, FL 33773

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: WAGGONER, BOB  
Address: 7994 POWDER HORN CIR  
City-St-Zip: LARGO, FL 33773

Title: D (X) Change ( ) Addition  
Name: MONGAN, LETTY  
Address: 4719 W. OAKELLER AVENUE  
City-St-Zip: TAMPA, FL 33611

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: SAUNDERS, HELEN  
Address: 8472 DEAUVILLE PLACE  
City-St-Zip: PINELLAS PARK, FL 33781

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BEVERLY WAGGONER

T

02/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date