

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005462

FILED
Mar 30, 2006
Secretary of State

Entity Name: GREATER MELBOURNE POLICE ATHLETIC LEAGUE, INC.

Current Principal Place of Business:

650 N. APOLLO BLVD.
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

650 N. APOLLO BLVD.
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 59-3604849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOUGELMAN, PAUL R III
900 E. STRAWBRIDGE AVE.
MELBOURNE, FL 32901 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: BRYAN, GLENN DR
Address: 5505 SAND LAKE RD.
City-St-Zip: MELBOURNE, FL 32934

Title: VD () Delete
Name: REEDER, BRUCE
Address: 304 DELAND AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: VD () Delete
Name: MUNCH, JIM
Address: 801 RIVERSIDE DR
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VD () Delete
Name: WILLIAMS, MICHAEL
Address: 112 LANSING ISLAND
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: VD () Delete
Name: SCHROEDER, JOSEPH
Address: P.O. BOX 510363 N/A
City-St-Zip: MELBOURNE, FL 32951

Title: SD () Delete
Name: WETZEL, BRIAN
Address: 579 FRANKLYN AVE
City-St-Zip: INDIALANTIC, FL 32903

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

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 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: GLENN BRYAN

PD

03/30/2006

Electronic Signature of Signing Officer or Director

Date