2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 02, 2008 8:00 am Secretary of State

ANNUAL	_ S	Secretary of State					
DOCUMENT # P02000089062 1. Entity Name DAYTONA BEACH POLICE OFFICER'S ASSOCIATION, INC.				06-02-2008	•		
Principal Place of Business	Mailing Address		73				
2090 S NOVA RD, STE 209-B DAYTONA BEACH, FL 32119	P.O. BOX 9776 Daytona Beach, FL 32	120					
	To Malling Address						
2. Principal Place of Business - No P.O. Box # 523 Magnolia. Ave.	3. Mailing Address SAME						LB B\$
Suite, Apt. #, etc.	Suite, Apt. #, etc.		05092008	Chg-P	CR2E03	14 (12/06)	
Daytona Beach, FL	City & State		4. FEI Number 43-198				plied For t Applicable
Zip Country	Zip	Country		of Status Desired		8.75 Add	itional
32114 VOIUSIA 6. Name and Address of Current	Registered Agent	1		Address of New	F	ee Required	d
_	<u> </u>	Name		- •		-	
GIMENEZ, KEVIN 129 SOUTH ST.	Street Addres	Street Address (P.O. Box Number is Not Acceptable)					
DAYTONA BEACH, FL 32114		***					
		City			FL	Zip Code)
8. The above named entity submits this statement f	or the purpose of changing its re	egistered office or regis	stered agent, or bo	th, in the State of f	Florida. I am fa	 amiliar with,	and accept
the obligations of registered agent.							
Signature, typed signature of registered ager	t and little if applicable (NOTE: f	Registered Agent signature requ	ired when reinstating)		DATE		
FILE NOW!!! SEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Trust Fund Contrib		55.00 May Be dided to Fees	In accordance corporation di	with s. 607.7 d not receive	193(2)(b), the prior r	F.S., the notice.
10. OFFICERS AND	DIRECTORS .	11.	ADDITIONS,	CHANGES TO OF			
INTLE HAME SLATERHED SIREET ADDRESS PO BOX 9776 CITY-SI-ZIP DAYTONA BEACH, FL 32114	Delete	STREET ADDRESS P. C	ernert, Ch	ب		Change	☐ Addition
WILE V	☐ Delete	TITLE V	nlieper, Si	eatried		Change Change	☐ Addition
NAME GERNERT, CHRISTIE SIREET ADDRESS PO BOX 9776		STREET ADDRESS P.O	. Box 9714	ຸັ			
OTY-SI-ZIP DAYTONA BEACH, FL 32114	□ Delete	7171.5	<u>iytora Bea</u>	.ch, FL 32		☐ Change	■ Addition
NAME SCHLIEPER, SIEGFRIED	Li Delete	NAME A	eri, Mike			Clande.	AGUITON
STREET ADDRESS 2090 S NOVA RD STE 209 B DAYTONA BEACH, FL 32119			o. Box 977 Jutona Be		32114		
TITLE T	Delete	DDE	orford, Bry			☐ Change	Addition
NAME GRANT, STEVE STREET ADDRESS PO BOX 9776		STREET ADDRESS P.	5.BOX 977	(c			
GIY-SI-ZIP DAYTONA BEACH, FL 32114		CITY-SI-ZIP Da	ytona Bea	ChiFL 3			
TITLE MANE	☐ Delete	TITLE NAME				☐ Change	Addition Addition
STREET ADDRESS		STREET ADDRESS					
THE THE	Delete	CITY-ST-ZIP				☐ Change	Addition
NAME		NAME					
STREET ADDRESS CITY-ST-ZIP		STREET ADORESS CITY - ST - ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changest, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5.1408

Daytime Phone #