2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000072384

FILED Apr 14, 2009 Secretary of State

Entity Name: FLORIDA HIGHWAY PATROL COMMAND OFFICERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3491-11 THOMASVILLE RD #133 3111-20 MAHAN DR. TALLAHASSEE, FL 32309 #2108 TALLAHASSEE, FL 32308 US **Current Mailing Address: New Mailing Address:** PO BOX 14245 TALLAHASSEE, FL 323174245 US FEI Number: 59-3408193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENTON, RICHARD 1415 E. PIEDMONT DR. SUITE 4 TALLAHASSEE, FL 32308 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WILLIAMS, STEVEN A. S Name: Name: P.O. BOX 14245 N/A Address: Address: City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip: Title: Title: () Delete () Change () Addition CULHANE, TIMOTHY Name: Name: P.O. BOX 14245 N/A Address: Address: TALLAHASSEE, FL 32317 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BROWN, CYRUS R Name: Name: P.O. BOX 14245 N/A Address: Address: City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip: Title: () Delete Title: () Change () Addition GASTON, KEITH Name: Name: Address: PO BOX 14245 Address: City-St-Zip: TALLAHASSEE, FL 32317 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN A. WILLIAMS, SR. P 04/14/2009