## 2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00499

Entity Name: STATE OF FLORIDA ASSOCIATION OF POLICE

ATHLETIC/ACTIVITIES LEAGUES, INC.

FILED
Aug 01, 2016
Secretary of State
CR3726969751

## **Current Principal Place of Business:**

2500 MONUMENT ROAD

204

JACKSONVILLE, FL 32225

# **Current Mailing Address:**

P.O. BOX 350399

JACKSONVILLE, FL 32235-0394

FEI Number: 59-2588363 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

SCOTT, LAVERN B SR. 2500 MONUMENT ROAD SUITE 204

JACKSONVILLE, FL 32225 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: MR. LAVERN B. SCOTT SR.

08/01/2016

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PD Title VP

NameBRIMER, LESLEENameCARRILLO, JONATHANAddress130 MALABAR ROAD SEAddress410 SE 3RD STREET

City-State-Zip: PALM BAY FL 32907 City-State-Zip: HALLANDALE BEACH FL 33009

Title TREASURER Title S

Name PATTERSON, STEPHANIE Name FLORES, JOSE

Address 600 BANYAN BLVD Address 2801 SALZEDO STREET

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: CORAL GABLES FL 33134

Title D Title TRUSTEE

Name SCOTT, LAVERN BSR Name SHAW, JASON

Address 2500 MONUMENT ROAD SUITE 204 Address 110 NORTH 11TH STREET

City-State-Zip: JACKSONVILLE FL 32225 City-State-Zip: PALATKA FL 32177

I hereby 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 all other like empowered.

SIGNATURE: MR. LAVERN B. SCOTT SR.

EXECUTIVE DIRECTOR

08/01/2016