2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08804

Entity Name: FLORIDA HIGHWAY PATROL RETIRED PERSONNEL

ASSOCIATION, INC.

Current Principal Place of Business:

7837 SW 102 PLACE MIAMI, FL 33173

Current Mailing Address:

7837 SW 102 PLACE MIAMI, FL 33173 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

FILED Feb 09, 2017

Secretary of State

CC2903658216

Name and Address of Current Registered Agent:

GRACEY, PAUL EJR 7837 SW 102 PLACE MIAMI, FL 33173 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

Officer/Director Detail:

Title PD Title VP

Name JONES, HIRAM D Name HELTON, RICHARD

Address 2306 MARGARITE DRIVE Address 2645 SEMINOLE PRATT WHITNEY RD

City-State-Zip: AUBURNDALE FL 33823 City-State-Zip: LOXAHATCHEE FL 33470

Title VP

Name HELTON, RICHARD

Name JONES, HIRAM DIR
Address 2645 SEMINOLE PRATT WHITNEY RD

Address 2306 MARGUERITE DR.,

City-State-Zip: LOXAHATCHEE FL 33470 City-State-Zip: AUBURNDALE FL 33823

Title D Title D

Name MCDONALD, GORDON D Name HART, JERRY

Address PO BOX 355 Address 3420 ASTON MARTIN DRIVE

City-State-Zip: MIDDLEBURG FL 32068 City-State-Zip: SEBRING FL 33872

Title SECRETARY Title DIRECTOR

Name GRACEY, PAUL E JR Name WHALEY, HERMAN

Address 7837 SW 102 PLACE Address PO BOX 1200

City-State-Zip: MIAMI FL 33173 City-State-Zip: EAST PALATKA FL 32131

Continues on page 2

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: PAUL E. GRACEY

SECRETARY/TREASURER 02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name WRIGHT, JIMMY C

Address 10517 VALENTINE RD., SOUTH

City-State-Zip: TALLAHASSEE FL 32317