

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08804

Entity Name: FLORIDA HIGHWAY PATROL RETIRED PERSONNEL ASSOCIATION, INC.**Current Principal Place of Business:**10225 W. BELFAST STREET
CRYSTAL RIVER, FL 34428**Current Mailing Address:**10225 W. BELFAST STREET
CRYSTAL RIVER, FL 34428 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WEAVER, KEELY
10225 W. BELFAST STREET
CRYSTAL RIVER, FL 34428 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: KEELY WEAVER****03/21/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	GOODWIN, ALTON J
Address	40711 11TH AVENUE EAST
City-State-Zip:	MAYAKKA FL 34251

Title	VP
Name	LATHROP, MARY J.
Address	11515 SW 51 COURT
City-State-Zip:	COOPER CITY FL 33330

Title	SECRETARY
Name	WEAVER, KEELY E JR
Address	10225 W. BELFAST STREET
City-State-Zip:	CRYSTAL RIVER FL 34428

Title	DIRECTOR
Name	BRANNON, RONALD B.
Address	4 APPLETREE LANE
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	DAVIS, DANIEL
Address	373 COBBLEWOOD DRIVE
City-State-Zip:	ROCKLEDGE FL 32955

Title	DIRECTOR
Name	VINCENT, GARY
Address	1831 SE 35 LANE
City-State-Zip:	OCALA FL

Title	VP
Name	HINGSON, EARL E
Address	4725 NW 5 AVE
City-State-Zip:	BOCA RATON FL 33431

Title	DIRECTOR
Name	LIDDELL, WALTER W JR.
Address	1507 HASOSAW NENE
City-State-Zip:	TALLAHASSEE FL 32301

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: KEELY WEAVER**SECRETARY/TREASURER 03/21/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CHANCY, JOSEPH
Address	207 SW LORY GLEN
City-State-Zip:	LAKE CITY FL 32024