

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005828

Entity Name: FLORIDA SEXUAL CRIMES INVESTIGATORS ASSOCIATION, INC.**FILED**
Mar 09, 2016
Secretary of State
CC3887685310**Current Principal Place of Business:**1510 MENORCA COURT
WELLINGTON, FL 33414**Current Mailing Address:**PO BOX 1506
WEST PALM BEACH, FL 33416**FEI Number: 27-0367999****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MOORE, E. EARL
1510 MENORCA COURT
WELLINGTON, FL 33414 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	DP
Name	MINTON, COURTNEY
Address	PALM BCH CTY S/O, 3228 GUN CLUB ROAD
City-State-Zip:	WEST PALM BEACH FL 33406

Title	VP
Name	HARRIGAN, GEORGE
Address	ST. JOHNS COUNTY SO 4015 LEWIS SPEEDWAY
City-State-Zip:	ST. AUGUSTINE FL 32084

Title	DIRECTOR
Name	MINTON, WILLIAM
Address	401 N. DIXIE HIGHWAY
City-State-Zip:	WEST PALM BEACH FL 33401

Title	DST
Name	MOORE, E. EARL
Address	1510 MENORCA COURT
City-State-Zip:	WELLINGTON FL 33414
Title	DIRECTOR
Name	AUGSPURGER, TERRI
Address	150 PELICAN REEF DRIVE
City-State-Zip:	ST. AUGUSTINE FL 32080

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: COURTNEY MINTON**PRESIDENT****03/09/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date