

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N9400000112

**Entity Name:** INTERNATIONAL POLICE ASSOCIATION, UNITED STATES SECTION, REGION ELEVEN, INC. FLORIDA'S GOLD COAST

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC1147306879**

**Current Principal Place of Business:**

8230 N.W. 68TH TERRACE  
TAMARAC, FL 33321-5017

**Current Mailing Address:**

8230 N.W. 68TH TERRACE  
TAMARAC, FL 33321-5017 US

**FEI Number: 23-7353558**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

KREUTER, RICHARD S  
8230 NW 68TH TERRACE  
TAMARAC, FL 33321-5017 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           PRES  
Name           KILLEN, ROBERT  
Address        P.O. BOX 970266  
City-State-Zip: COCONUT CREEK FL 33097-0266

Title           SEC.  
Name           COLEMAN, CARLTON JR.  
Address        5747 SW 57 WAY  
City-State-Zip: DAVIE FL 33314

Title           TREA  
Name           KREUTER, RICHARD S  
Address        8230 N.W. 68TH TERRACE  
City-State-Zip: TAMARAC FL 33321-5017

Title           1 VP  
Name           SAMUEL, GOLDSTEIN  
Address        4751 BALDRIC STREET  
City-State-Zip: BOCA RATON FL 33428

Title           2 VP  
Name           DIRK, LOWRY  
Address        2512 BIMINI LANE  
City-State-Zip: FORT LAUDERDALE FL 33312

*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: RICHARD S. KREUTER**

**TREASURER**

**01/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date