2003

OFFICE OF THE ATTORNEY GENERAL
LAW ENFORCEMENT TELEPHONE SOLICITATION ACT
Tex. Rev. Civ. Stat. Ann. Art. 9023e (Vernon's 1997)

REGISTRATION FORM

Charitable Trusts Section
Consumer Protection Division
P.O. Box 12548
Austin, Texas 78711-2548
800-621-0508 512-463-2185

[✓] Initial Registration [ ] Renewal Registration

1. Registrant's Name: Disabled Police Officers Counseling Center, Inc.

Assumed Name, d.b.a. name, or publication name:

N/A

Street Address: 222 Government Ave., Suite C

Mailing Address:

City: Niceville State: FL Zip: 32578

Tel. No.: (850-7)29-0009 Fax No.: (850-7)29-2555

Federal Tax ID# 52-1798881 State Tax Employer ID#

2. Attach a list providing the mailing address, street address, phone number and fax number of each office, chapter, local unit, branch or affiliate of registering organization.

N/A

3. Provide the name and address of organization's registered agent

N/A

4. Provide the name, title, address and phone numbers of each officer, director, and executive director or other chief operating officer:

See attached list of officers/directors.

5. Provide the name of each officer, director, or employee who is either compensated by the organization or has custody and control of funds of the organization:

See attached

6. Provide the name of each officer, director, or employee who has been convicted of or pleaded nolo contendere to a misdemeanor involving fraud or the theft, misappropriation, misapplication, or misuse of property of another, or any felony, stating name, offense, and state, court and date of conviction or plea of nolo contendere.

N/A

7. Date of Incorp: 10/28/1992 State of Incorp: MD Fiscal Year Ends: 12/31 (Day/Month)
Date Began Doing Business: _____

8. If not incorporated, type of organization and date established:

N/A

9. Provide a statement describing the organization's charitable purposes and a list of the programs for which funds are solicited:

See attached statement of charitable purpose.

10. List the names, addresses and telephone numbers of the organization's accountants and auditors, and the method of accounting used:

See attached

11. Provide the name and address of each commercial telephone solicitor, including subcontracted commercial telephone solicitors, engaged by the organization during the preceding twelve months (attach additional sheets as necessary):

Name: n/a none in TX
Address: _____

Name: _____

Address: _____

12. The total amount of contributions received during the preceding 12 months:
$ 1010736

13. The total amount paid to commercial telephone solicitors during the preceding 12 months:
$ 763,619

14. The total fund-raising costs during the preceding 12 months: $ 782419

15. Has the organization applied for and been granted tax exempt status by the IRS?
[ ] No [X] Yes Date of Application _____

Date Exemption granted or denied: 1/12/1993 ; IRS Exempt Code, if granted 3

16. Has tax exemption ever been revoked or modified: [ ] Yes [✓] No
If yes, date of action: _____.

17. Is the organization eligible to receive tax-exempt contributions under § 170, IRS Code of 1986 (26 U.S.C § 170)? [✓] Yes [ ] No

18. Attach a copy of the organization's most recently filed IRS Form 990 and other federal tax returns, including all supplements, amendments and attachments to those returns, and any requests for extension to file those returns, if not previously provided to the Office of the Attorney General. See attached

19. If no federal tax returns are filed by the organization, attach a statement as to the reason none are filed, and a copy of the organization's most recent financial statements, including audited financial statements, if any. N/a

20. Attach a copy of the commercial telephone solicitor bond filed with the Secretary of State.

21. Attach $50.00 filing fee payable to the Attorney General of Texas.

22. Attach a copy of a signed statement obtained from each commercial telephone solicitor and each subcontracted telephone solicitor: N/A none in TX

I, _____, an authorized representative of _____ Center Inc declare I am engaged by the registering organization to perform telephone solicitations. I have complied with all state and local registration laws.

_____ _____
Signature

REGISTRATION UNDER THIS ACT DOES NOT IMPLY ENDORSEMENT BY THE

STATE OF TEXAS OR THE ATTORNEY GENERAL, AND ORGANIZATIONS AND ENTITIES ARE PROHIBITED FROM STATING OR IMPLYING TO THE CONTRARY.

I, Terry K. Morrison, an official representative of Disabled Police Officers Counseling Center, Inc., authorized to act on behalf of the registering entity, declare that the registering organization has attempted in good faith to comply with all applicable Texas, county and municipal ordinances regarding telephone solicitation.

Terry K. Morrison 11/26/03
Signature

CERTIFICATION

I, Terry K. Morrison, certify that the above information and the information contained in any attachment hereto is true, correct and complete, to the best of my knowledge.

STATE OF FLORIDA
COUNTY OF OKALOOSA

Terry K. Morrison 11/26/03
AFFIANT

SIGNED AND SWORN TO BEFORE ME on the 26 day of NOV, ~~199~~ 2003

NOTARY PUBLIC

Ralph Edward Thien
My Commission CC920936
Expires March 21, 2004

DISABLED POLICE OFFICERS COUNSELING CENTER, INC.
Purpose Statement/Program Services

Purpose

Disabled Police Officers Counseling Center is a non-profit, charitable organization whose primary purpose is to provide educational and counseling programs to assist disabled police officers, and to educate the public on the needs and abilities of disabled police officers.

Program Services

- Counseling — To assist disabled police officers in coping with their disabilities
- Education — To educate the public on the needs of disabled police officers
- Seminars — Conducted to provide a forum to assist disabled police officers
- Research — To study the underlying causes that lead to the high suicide rate of police officers.

DISABLED POLICE OFFICERS COUNSELING CENTER, INC.
Officers/Directors Listing

Terrence K. Morrison, M.A. **President/Treasurer**
1697 Vine Avenue
Niceville, FL 32578
(850) 729-0009
DOB: 06-19-50
SS#: 217-48-5109

Lorna M. Morrison, R.N., B.S.N. **Vice President/Secretary**
1697 Vine Avenue
Niceville, FL 32578
(850) 729-0009

Frank J. Gaines, Jr. **Director**
12801 Cheval Court
Upper Marlboro, MD 20772
(301) 599-0233

Col. William Harrison **Director**
401 Capitol Heights Blvd.
Capitol Heights, MD 20743
(301) 599-0233

Gregg C. Hunt, M.A. **Director**
1166 Amber Way
Owings, MD 20736
(301) 599-0233

Paul J. Reinstein, J.D. **Director**
7127 Allentown Road
Camp Springs, MD 20744
(301) 599-0233

DISABLED POLICE OFFICERS COUNSELING CENTER, INC.
Accountant

JJ Schmelzle & CO.
Certified Public Accountants
Joseph J. Schmelzle
13321 New Hampshire Ave., Suite 200
Silver Spring, MD 20904
(301) 989-9757
Fax: (301) 989-3045