

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734093

FILED
Jan 12, 2009
Secretary of State

Entity Name: CORAL GABLES POLICE BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business:

7350 CORAL WAY
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

2801 SALZEDO STREET
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 59-1649174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAUE, RICHARD
2801 SALZEDO STREET
CORAL GABLES, FL 33314 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NAUE, RICHARD
Address: 2801 SALZEDO ST
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD () Delete
Name: HUDAK, EDWARD J
Address: 2801 SALZEDO ST
City-St-Zip: CORAL GABLES, FL 33134

Title: S () Delete
Name: AZAN, REINALDO A
Address: 2801 SALZEDO ST
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Delete
Name: FREVOLA, MICHAEL
Address: 2801 SALZEDO ST NERT
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: FREVOLA, MICHAEL
Address: 2801 SALZEDO ST
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL H FREVOLA

T

01/12/2009

Electronic Signature of Signing Officer or Director

Date