2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03255

FILED Mar 18, 2004 Secretary of State

Entity Name: CORAL SPRINGS FRATERNAL ORDER OF POLICE LODGE NO. 87, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 770-626 P.O. BOX 770626

CORAL SPRINGS, FL 330770626 CORAL SPRINGS, FL 330770626

Current Mailing Address: New Mailing Address:

P.O. BOX 770-626 P.O. BOX 770626

CORAL SPRINGS, FL 330770626 CORAL SPRINGS, FL 330770626

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

WILLIAMS, DOUGLAS 2801 CORAL SPRINGS DR. CORAL SPRINGS, FL 33065 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:

TORL.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: WILLIAMS, DOUGLAS Name: WILLIAMS, DOUGLAS

Address: 2801 CORAL SPRINGS Address: P.O.BOX 770626

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 330770626

Title: T () Delete Title: T (X) Change () Addition

 Name:
 KLEE, CYNTHIA
 Name:
 KOZLOWSKI, BRUCE

 Address:
 2801 CORAL SPRINGS DRIVE
 Address:
 P.O.BOX 770626

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 330770626

Title: T () Delete Title: T (X) Change () Addition

Name: RACZKA, SHERRY Name: RACZKA, SHERRY

Address: 2801 CORAL SPRINGS DR. Address: P.O.BOX 770626

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 330770626

Name: WALTERS, JOHN Name: WALTERS, JOHN Address: 2801 CORAL SPRINGS DR. Address: P.O.BOX 770626

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 330770626

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOUGLAS R. WILLIAMS D 03/18/2004