## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03255

FILED Jan 31, 2005 Secretary of State

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

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
P.O. BOX CORAL S	770626 PRINGS, FL 330770626			
Current N	Nailing Address:	New Mailing Address	s:	
P.O. BOX CORAL S	770626 PRINGS, FL 330770626			
El Number	r: FEI Number Applied For (	) FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
lame and	d Address of Current Registered Agen	t: Name and Address o	f New Registered Agent:	
2801 COF	3, DOUGLAS RAL SPRINGS DR. PRINGS, FL 33065 US	WILLIAMS, DOUGLAS P.O.BOX 770626 CORAL SPRINGS, FL		
	e named entity submits this statement for e of Florida.	the purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
	RE:		01/31/2005	
JONATO	Electronic Signature of Registered	d Agent	01/31/2005 Date	
		-		
<b>DFFICER</b> itle: ame: ddress:	Electronic Signature of Registered	-	Date	
DFFICER itle: lame: .ddress: bity-St-Zip: itle: lame: .ddress:	Electronic Signature of Registered S AND DIRECTORS:  D () Delete WILLIAMS, DOUGLAS P.O.BOX 770626	ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	
	Electronic Signature of Registered  S AND DIRECTORS:  D () Delete WILLIAMS, DOUGLAS P.O.BOX 770626 CORAL SPRINGS, FL 330770626  T () Delete KOZLOWSKI, BRUCE P.O.BOX 770626	ADDITIONS/CHANGE  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition	

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: JOHN A. WALTERS T 01/31/2005