

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 29, 2009  
Secretary of State

DOCUMENT# N08000004986

**Entity Name:** A MICHAEL FUX FOUNDATION FOR THE BENEFIT OF FLORIDA LAW ENFORCEMENT OFFICERS  
INJURED IN THE LINE OF DUTY, INC.

**Current Principal Place of Business:**

200 SOUTH BISCAYNE BOULEVARD  
SUITE 4650  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

200 SOUTH BISCAYNE BOULEVARD  
SUITE 4650  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 26-2681962      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CORDERO, LUIS A  
200 SOUTH BISCAYNE BOULEVARD  
SUITE 4650  
MIAMI, FL 33131 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: P ( ) Delete  
Name: FUX, MICHAEL  
Address: 200 SOUTH BISCAYNE BOULEVARD SUITE 4650  
City-St-Zip: MIAMI, FL 33131

Title: VP,S ( ) Delete  
Name: CORDERO, LUIS A  
Address: 200 SOUTH BISCAYNE BOULEVARD SUITE 4650  
City-St-Zip: MIAMI, FL 33131

Title: VP,T ( ) Delete  
Name: DE PARRE, BARON  
Address: 7365 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

Title: VP ( ) Delete  
Name: PAPIER, RONALD  
Address: 145 SW 25TH ROAD  
City-St-Zip: MIAMI, FL 33129

Title: VP ( ) Delete  
Name: GIORDANO, JEFFREY  
Address: 1063 NW 133RD COURT  
City-St-Zip: MIAMI, FL 33182

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FUX, MICHAEL  
Address: 200 S. BISCAYNE BLVD SUITE 4650  
City-St-Zip: MIAMI, FL 33131

Title: VP,S (X) Change ( ) Addition  
Name: CORDERO, LUIS A  
Address: 200 S. BISCAYNE BLVD SUITE 4650  
City-St-Zip: MIAMI, FL 33131

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

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

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

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: LUIS A. CORDERO

VP

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date