2003 NOT-FOR-PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBŘ)

## **DOCUMENT # N26247**

1. Entity Name

FRATERNAL ORDER OF POLICE, PASCO COUNTY SHERIFF' S LODGE #29, INC.

	, #23, ING.		'	COD WE TWO				
F. O. P. LODGE 29 S 4220 LAND O'LAKES BLVD. P.C LAND O'LAKES FL 34639 NE		Mailing Address S LODTE #29. INC P.O. BOX 426 NEW PORT RICHEY FL 344 US	S LODTE #29. INC P.O. BOX 426 NEW PORT RICHEY FL 34656-0426		1 100 1150 H 216 110 10		iji andih 82811 818	<u>1</u> 41 <b>216</b> 11 4 <b>16</b> 4
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-2839082 Applied For Not Applicable			
Zip · Country Z		Zip	Zip Country		5. Certificate of Status Desired Sa.75 Additional Fee Required			
	6. Name and Address of Current	Registered Agent	· —		7. Name and Addres	s of New Registered	Agent	
			Na	LATO				
LATON, FRANK 5646 HEREFORD DRIVE			æ> <= ○Str	eet Address (	P.O. Box Number is Not	Acceptable)		
	RT RICHEY FL 34655			<u> </u>		<u> </u>		
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	e named entity submits this statement fo tions of registered agent.	or the purpose of changing its	registered on	ice or register	ed agent, or both, in the	State of Florida. Tam	ramılar witn,	апо ассері
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agen	t signature required	d when reinstating)	DATE		[
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	1 - 1 -	9. Election Car Trust Fund C	. •	sing 🔲	\$5.00 May Be Added to Fees	Make Chec Florida Depar		
	tember 10, 2003, min will be \$2	236.25 Trust Fund C	. •			Florida Depar	tment of S	State
, After Sept	tember 10, 2003, min will be \$2	236.25 Trust Fund C	Contribution.		Added to Fees	Florida Depar	tment of S	State
After Sept	OFFICERS AND DI	Trust Fund C	Contribution.		Added to Fees	Florida Depar	tment of S	State
After Sep	OFFICERS AND DI PDS LATON, FRANK	Trust Fund C	11.		Added to Fees	Florida Depar	tment of S	State
After Septing.  10.  TITLE  NAME	OFFICERS AND DI PDS LATON, FRANK 9249 CALLE ALTA	Trust Fund C	11. TITLE NAME	. , ,	Added to Fees	Florida Depar	tment of S	State
After Septing.  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP.	OFFICERS AND DI PDS LATON, FRANK	RECTORS Delete	11. TITLE NAME STREET ADD CITY-ST-ZI	IRESS P	Added to Fees  ADDITIONS/CHANGES	Florida Depar	RECTORS IN Change	State
10. TITLE NAME STREET ADDRESS	OFFICERS AND DI PDS LATON, FRANK 9249 CALLE ALTA NEW PORT RICHEY FL 34655	Trust Fund C	11. TITLE NAME STREET ADD	IRESS P	Added to Fees  ADDITIONS/CHANGES	Florida Depar	tment of S	State
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-7IP

STECTURATED, LAW (TREASURER)

Aug 21, 2003 8:00 am Secretary of State

08-21-2003 90110 029 \*\*\*\*61.25