

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000002298

1. Entity Name

**BROWARD FEDERAL LAW ENFORCEMENT LODGE # 138, FRA  
TERNAL ORDER OF POLICE, INC.**

Principal Place of Business

Mailing Address

**220 NW 180 AVE  
HOLLYWOOD FL 33029  
US**

**P.O. BOX 22416  
FT. LAUDERDALE FL 33335-2416**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0406115**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TALLENT, RICHARD G  
3701 SW 146TH AVE.  
MIRAMAR FL 33027**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME **PD TALLENT, RICHARD G**  
STREET ADDRESS **3701 SW 146TH AVE.**  
CITY-ST-ZIP **MIRAMAR FL 33027**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **VD VASWANI, EMERIC**  
STREET ADDRESS **9456 NW 8TH CIRCLE**  
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **SD RANDECKER, COURTNEY J**  
STREET ADDRESS **6830 SW 8TH STREET**  
CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **TD SNODGRASS, CHARLES**  
STREET ADDRESS **18200 SW 48TH STREET**  
CITY-ST-ZIP **FT LAUDERDALE FL 33331**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE: *Courtney J. Randecker*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**May 08, 2002 8:00 am**  
**Secretary of State**

05-08-2002 90023 019 \*\*\*\*61.25

**80090982**



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)