


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 08:00 AM
Secretary of State

DOCUMENT # N94000002298	
1. Entity Name BROWARD FEDERAL LAW ENFORCEMENT LODGE # 138, FRATERNAL ORDER OF POLICE, INC.	

Principal Place of Business 8200 W. SR 84 DAVIE, FL 33324 US	Mailing Address P.O. BOX 22416 FT. LAUDERDALE, FL 33335-2416
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04072004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0406115	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent TALLENT, RICHARD G 3701 SW 146TH AVE. MIRAMAR, FL 33027

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000112645 04/14/04-80029-022 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TALLENT, RICHARD G 3701 SW 146TH AVE. MIRAMAR, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VASWANI, EMERIC 9456 NW 8TH CIRCLE PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RANDECKER, COURTNEY J 6830 SW 8TH STREET PEMBROKE PINES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SNODGRASS, CHARLES 18200 SW 48TH STREET FT LAUDERDALE, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *C.J. RANDECKER* **C. J. RANDECKER, Secretary** **4/6/04** **954-356-7433**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #