## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000006273

Entity Name: CHIEF PETTY OFFICERS OF MIAMI, INC.

FILED Apr 06, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

720 BAYSHORE DRIVE, APT. 403 FORT LAUDERDALE, FL 33304

**Current Mailing Address: New Mailing Address:** 

720 BAYSHORE DRIVE, APT. 403 FORT LAUDERDALE, FL 33304

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

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

RUMIN, EDWARD R 2755 E. OAKLAND PARK BLVD., SUITE 304 FORT LAUDERDALE, FL 33306

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:

City-St-Zip:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete ( ) Change (X) Addition POWELL, NORMAN D Name: Name: Address: Address: 16100 SOUTHWEST 97TH COURT City-St-Zip: City-St-Zip: MIAMI, FL 33157 Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: TEDLOW, RICHARD J Address: Address: 4576 SOUOTHWEST 139TH CT APT A City-St-Zip: City-St-Zip: MIAMI, FL 33134 Title: () Delete Title: TREA ( ) Change (X) Addition HERRERA, JORGE Name: Name: Address:

Address: 8921 SW 57TH STREET City-St-Zip: COOPER CITY, FL 33328

Title: () Delete Title: SEC ( ) Change (X) Addition Name: Name: MALONE, STELLA G

720 BAYSHORE DRIVE #403 Address: Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33304

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: STELLA GAYLE MALONE SECR 04/06/2005