

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000001893

**FILED**  
**Feb 18, 2019**  
**Secretary of State**  
**7254130380CC**

**Entity Name:** FRATERNAL ORDER OF POLICE BROWARD ATLANTIC COAST  
LODGE #53, INC.

**Current Principal Place of Business:**

5591 NW 51 AVE  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

P.O. BOX 15025  
PLANTATION, FL 33318 US

**FEI Number: 31-1103284**

**Certificate of Status Desired: No**

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

RICKETTS, EDDISON  
5591 NW 51 AVE  
COCONUT CREEK, FL 33073 US

*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: EDDISON RICKETTS**

**02/18/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            RICKETTS, EDDISON  
Address        P.O. BOX 15025  
City-State-Zip: PLANTATION FL 33318

Title            TREASURER  
Name            CUMMINGS, CATHY  
Address        P. O. BOX 15025  
City-State-Zip: PLANTATION FL 33318

Title            VP  
Name            HUBER, CARTER  
Address        P.O. BOX 15025  
City-State-Zip: PLANTATION FL 33318

Title            CHAPLAIN  
Name            COOPER, KENNETH  
Address        P.O. BOX 15025  
City-State-Zip: PLANTATION FL 33318

Title            SERGEANT AT ARMS  
Name            SCHLEGEL, ROBERT  
Address        P.O. BOX 15025  
City-State-Zip: PLANTATION FL 33318

*I hereby 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 all other like empowered.*

**SIGNATURE: CATHY CUMMINGS**

**TREASURER**

**02/18/2019**

Electronic Signature of Signing Officer/Director Detail

Date