LODGE #53, I	NC.	CC1064176314
<b>Current Princ</b>	ipal Place of Business:	
5591 NW 51 AVE		
COCONUT CREE	K, FL 33073	
Current Mailir	ng Address:	
P.O. BOX 150	25	
PLANTATION	FL 33318 US	
FEI Number: 31-1103284		Certificate of Status Desired: No
Name and Ad	dress of Current Registered Agent:	
RICKETTS, EDDI	SON	
5591 NW 51 AVE COCONUT CREE	K EL 33073 LIS	
COCONCT CREE		
The above named e	ntity submits this statement for the purpose of changing its registered office or registe	ered agent, or both, in the State of Florida.
SIGNATURE:	EDDISON RICKETTS	01/19/2018
	Electronic Signature of Registered Agent	Date

## **Officer/Director Detail :**

Title	PRES	Title	TREASURER	
Name	RICKETTS, EDDISON	Name	CUMMINGS, CATHY	
Address	P.O. BOX 15025	Address	P. O. BOX 15025	
City-State-Zip:	PLANTATION FL 33318	City-State-Zip:	PLANTATION FL 33318	
Title	VP	Title	CHAPLAIN	
Name	HUBER, CARTER	Name	COOPER, KENNETH	
Address	P.O. BOX 15025	Address	P.O. BOX 15025	
City-State-Zip:	PLANTATION FL 33318	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

01/19/2018

FILED Jan 19, 2018

**Secretary of State** 

Electronic Signature of Signing Officer/Director Detail

Date

## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000001893

Entity Name: FRATERNAL ORDER OF POLICE BROWARD ATLANTIC COAST