## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004530

Entity Name: FALLEN RIDERS MEMORIAL FUND INC.

Mar 26, 2014

**Secretary of State** CC9958887740

**FILED** 

#### **Current Principal Place of Business:**

4437 TULIP COURT LAKE WORTH, FL 33461

## **Current Mailing Address:**

4437 TULIP COURT

LAKE WORTH, FL 33461 US

**FEI Number: NOT APPLICABLE** 

Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

LINKE, WILLIAM R JR 54529 BUCKHORN ROAD ASTOR, FL 32102 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title DIR. Title VΡ

BARONE, LINDA Name Name SCOTT, MALCZEWSKI VP

Address 4437 TULIP COURT Address 4437 TULIP COURT

City-State-Zip: LAKE WORTH FL 33461 City-State-Zip: LAKE WORTH FL 33461

Title **TRES** 

Name LINKE, WILLIAM R JR. Address 54529 BUCKHORN ROAD

City-State-Zip: ASTOR FL 32102

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: WILLIAM R LINKE JR.

TREAS.

03/26/2014