

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

DOCUMENT# N18000000692

**FILED  
May 01, 2019  
Secretary of State  
2800537830CC**

**Entity Name:** PROFESSIONAL FIREFIGHTERS ASSOCIATION OF SOUTH FLORIDA COMMUNITY OUTREACH, INC

**Current Principal Place of Business:**

3389 SHERIDAN STREET  
#147  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

3389 SHERIDAN STREET  
#147  
HOLLYWOOD, FL 33021 US

**FEI Number: 82-4143003**

**Certificate of Status Desired: No**

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

MARTIN, KEITH  
3389 SHERIDAN STREET  
#147  
HOLLYWOOD, FL 33021 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 P  
Name MARTIN, KEITH  
Address 3389 SHERIDAN STREET  
#147  
City-State-Zip: HOLLYWOOD FL 33021

Title VP/T  
Name BRITTON, BRUCE  
Address 3389 SHERIDAN STREET  
#147  
City-State-Zip: HOLLYWOOD FL 33021

Title S  
Name BIEN-AMIE, KATONYA  
Address 3389 SHERIDAN STREET  
#147  
City-State-Zip: HOLLYWOOD FL 33021

*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: KEITH MARTIN**

**P**

**05/01/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date