2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Mar 03, 2003 8:00 am Secretary of State

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FORT L N, INC.	LAUDERDALE FÍREMEN		MENT ASSOCI/	ATIO)	02-20-20	003 90110	041 *	01.23
	Place of Business	Mai	iling Address			┥ .				
309 1/2 S.I	W. 26TH STREET RDALE FL 33315	309 1	1/2 S.W. 26TH STRE AUDERDALE FL 3331	:ET 15						
2. Princip	al Place of Business	3. M	lailing Address							
	Apt. #, etc.	- s	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & S		C	City & State			4. FEI Number		· · ·		Applied For
Zip	Country 6 Name and Address		Zip	Country		5. Certificate of	Status Desired	□ \$		Not Applicab Additional ired
	6. Name and Address o	if Current Register	red Agent			7. Name and Ac	dress of New R			ired
HI IMP	IREY, WILLIAM			Nam	ne H			ehiam ee Ca	Jenn	
309 1/2	PREY, WILLIAM 2 S.W. 26TH STREET IDERDALE FL 33315	,		Stree	et Address (P	P.O. Box Number is	Not Acceptable)		-
•• -	DENDALE PL 00010				_	- 				
				City					Zip Co	vie .
8. The above	we named entity submits this sta gations of registered agent.	atement for the purp	cose of changing its	registered offic	e or registere	of agent or both in	Cinto at Ela	FL.		
	- true									
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SIGNATURE	Signature, typed or printed name of regis	tered agent and title if app	Arabia. (NOTE		Onatura required w	Humph	227		8/0	<u> </u>
SIGNATUME		stered agent and title if app	Micable. (NOT)	E: Registered Agent sig		HUMPH when reinstating)	227	7_ [[810	<u>} </u>
	Signature, typed or printed name of regis	.25	9. Election Carr Trust Fund C	E: Registered Agent sign mpaign Financing Contribution.	gnature required w	\$5.00 May Be Added to Fees	Mak Florid	DATE Check Pa Department	ayable	to State
10.	Signature, typed or printed name of regis		9. Election Cam Trust Fund C	E: Registered Agent sign mpaign Financing Contribution.	gnature required w	\$5.00 May Be Added to Fees	Mak Florida ES TO OFFICER	Se Check Pa Department	ayable	to State
10. Title Name	FILE NOW: FEE IS \$61. OFFICERS PD HUMPHREY, WILLIAM	.25 AND DIRECTORS	9. Election Carr Trust Fund C	E: Registered Agent significant significan	gnature required w	\$5.00 May Be Added to Fees	Mak Florida ES TO OFFICER	E Check P a Department	ayable	to State
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