

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703984

FILED
Jul 17, 2008
Secretary of State

Entity Name: MIRAMAR POLICE BENEVOLENT ASSOCIATION INC.

Current Principal Place of Business:

7000 S.W. 35TH STREET
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

PO BOX 4271
MIRAMAR, FL 33083

New Mailing Address:

FEI Number: 65-0013773 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUENO, GILBERTO
3064 N. COMMERCE PARKWAY
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BONIS, MARIO
Address: 3064 N. COMMERCE PARKWAY
City-St-Zip: MIRAMAR, FL 33025

Title: VD () Delete
Name: GARCIA, DANIEL
Address: 3064 N. COMMERCE PARKWAY
City-St-Zip: MIRAMAR, FL 33025

Title: TD () Delete
Name: BUENO, GILBERTO
Address: 3064 N. COMMERCE PARKWAY
City-St-Zip: MIRAMAR, FL 33025

Title: SD () Delete
Name: DUNKELBERGER, JAMES
Address: 3064 N. COMMERCE PARKWAY
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GILBERTO BUENO

TD

07/17/2008

Electronic Signature of Signing Officer or Director

Date