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

DOCUMENT # 719448

1. Entity Name

FIRE FIGHTERS OF FORT LAUDERDALE, LOCAL 1545, I. A.F.F., INC.

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FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90214 021 ****61.25

A.F.F.,INC.			COD WE THE	′				
ang 1/2 SW 26TH ST. 309 1.		Mailing Address 309 1/2 SW 26TH ST. FORT LAUDERDALE FL 3331	5	(SECOND (1886) (1886)	1815: Andri Andria (1816 1816) (1816) (1816) (1816)	†1211 010 11	61311 18 1 1	
Principal Place of Business 3.		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Number 59-1498225		Applied For Not Applicable		
Zip Country		Zip Country		5. Certificate of Status Desired See Required			tional	
<u>.</u>			32 24 12 1	Thomas and Address	ss of New Registered Agent	•		-
	6. Name and Address of Curren	t Registered Agent	Name	7. Name and Addres	ss of New Registered Agent			
			name	Harro				
IAN KEMP 3288 NW 26 CT			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
BOCA RA	TON FL 33434							
			City		r L	ip Code		
8. The above	named entity submits this statement	for the purpose of changing its r	egistered office or regis	stered agent, or both, in the	e State of Florida. I am familia	ar with, a	nd accept	
	ions of registered agent.		•					ļ
					2/13/03			ļ
SIGNATURE .	La an Kin	y4			ر عرد ۱۱ م			ļ
SIGNATORE .	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE:	Registered Agent signature requ	uired when reinstating)	DATE			
		9. Election Cam	paign Financing	\$5.00 May Be	Make Check Pay	yable t	0	
	FILE NOW: FEE IS \$61.25	Trust Fund Co	ontribution.	Added to Fees	Florida Departmer	nt of S	tate	
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIRECT	ORS IN		ہ ا
TITLE	SD	☐ Delete	TITLE			Change	☐ Addition	٤
NAME	HOLE, DENNIS		NAME					15
STREET ADDRESS	9166 NW 15 ST		STREET ADDRESS					6
CITY-ST-ZIP	PLANTATION FL		CITY-ST-ZIP		<u> </u>			يَا
TITLE	PD	☐ Delete	TITLE			Change	☐ Addition	ģ
NAME	KEMP, IAN		NAME		¥.			`
STREET ADDRESS	3288 NW 26 CT		STREET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33434		CITY-ST-ZIP					
TITLE	1	☐ Delete	TITLE		X	Change	☐ Addition	
NAME	HUMPHREY, WILLIAM							
	3170 SW 19 ST		STREET ADDRESS	1961 SW 1	10 terr PL 3331	`		
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	•	CITY-ST-ZIP	Plant ATION	PL 3331			
TITLE	V	☐ Delete	TITLE			Change	Addition	
NAME	SAN ANGELO, JOHN		NAME		•			
STREET ADDRESS	7031 RALEIGH ST		STREET ADDRESS					
CITY-ST-ZIP	HOLLYWOOD FL 33024		CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			Change	Addition	{
I NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			Change	Addition	
NAME	1		NAME		_			
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					-
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TSIGHILLONE REQUEENKEN

2/13/03

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