

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737754

FILED
Jul 10, 2005
Secretary of State

Entity Name: HIALEAH FIREMAN'S BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business:

800 W. 49TH ST.
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

800 W. 49TH ST.
HIALEAH, FL 33012

New Mailing Address:

13295 80TH LANE NORTH
WEST PALM BEACH, FL 33412

FEI Number: 59-0965571 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

POWELL, ROBERT
800 W 49TH ST
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

POWELL, ROBERT
13295 80TH LANE NORTH
WEST PALM BEACH, FL 33412 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: _____

07/10/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: PFLUM, WAYNE
Address: 800 W. 49TH ST.
City-St-Zip: HIALEAH, FL

Title: PD () Delete
Name: WILLIAMS, ROBERT III
Address: 800 W. 49TH ST.
City-St-Zip: HIALEAH, FL

Title: SD () Delete
Name: GARCIA, JERRY
Address: 800 W. 49TH ST.
City-St-Zip: HIALEAH, FL

Title: TD () Delete
Name: POWELL, ROBERT
Address: 800 W. 49TH ST.
City-St-Zip: HIALEAH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: PFLUM, WAYNE
Address: 800 W. 49TH ST.
City-St-Zip: HIALEAH, FL

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

Title: SD (X) Change () Addition
Name: POWELL, ROBERT
Address: 13295 80TH LANE NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

Title: TD (X) Change () Addition
Name: POWELL, ROBERT
Address: 13295 80TH LANE NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT POWELL

SD

07/10/2005

Electronic Signature of Signing Officer or Director

Date