2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# 744554

Entity Name: FORT LAUDERDALE FRATERNAL ORDER OF POLICE LODGE NO. 31, INC.

Current Principal Place of Business:

735 NE 3 AVENUE
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

735 NE 3 AVENUE
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 59-2424159 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOKEINSKY, JACK
735 NE 3 AVENUE
FORT LAUDERDALE, FL 33304 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: V ( ) Delete
Name: TUCKER, MICHAEL S
Address: 735 NE 3 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: PD ( ) Delete
Name: LOKEINSKY, JACK
Address: 735 NE 3 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: SD ( ) Delete
Name: HAYES, KEVIN
Address: 735 NE 3 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: TD ( ) Delete
Name: HANSTEIN, COLLEEN
Address: 735 NE 3 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition
Name: NORVIS, ROBERT
Address: 735 NE 3 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

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: JACK LOKEINSKY PD 01/13/2009

Electronic Signature of Signing Officer or Director — Date