


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90055 009 ****61.25

DOCUMENT # N03000001805 1. Entity Name MARGATE FOP LODGE # 75 INC	
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Principal Place of Business 2304 EAST RIVER DR MARGATE, FL 33063 US	Mailing Address 2304 EAST RIVER DR MARGATE, FL 33063 US
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50016842



02112005 No Chg-NP CR2E037 (10/03)

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4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOOLLEY, GEORGE W
2304 EAST RIVER DR
MARGATE, FL 33063

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *George Woolley* George Woolley 02-11-05
Signature, typed or printed name of registered agent and title. (Applicable) (NOTE: Registered Agent's signature required when re-appointing) DATE

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CRICI, KAREN PO BOX 936575 MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LEE, JAMES PO BOX 936575 MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC WOOLLEY, GEORGE W PO BOX 936575 MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS 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 I/we empowered.

SIGNATURE: *George Woolley* SEC GEORGE WOOLLEY 02-11-05 954-588-6640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #