

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000001062

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Entity Name:** IAFF LOCAL 1210CORAL GABLES PROFESSIONAL FIREFIGHTERS ASSOCIATION INC

**Current Principal Place of Business:**

11830 SW 80TH ROAD  
PINECREST, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 140071  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 59-6177379

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHICKILLO, MICHAEL  
11830 SW 80TH ROAD  
PINECREST, FL 33156 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: P  
Name: CHICKILLO, MICHAEL J  
Address: 11830 80TH ROAD  
City-St-Zip: PINECREST, FL 33156

Title: VP  
Name: BUSH, STEVE M  
Address: 12901 SW 83RD CT.  
City-St-Zip: PINECREST, FL 33156

Title: SEC  
Name: THORNHILL, DANIEL J  
Address: 1864 SW ST. ANDREWS DRIVE  
City-St-Zip: PALM CITY, FL 34990

Title: TRUS  
Name: MAXSON, GERALD M  
Address: 5411 110TH AVE NORTH  
City-St-Zip: WEST PALM BEACH, FL 33411

I hereby 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 all other like empowered.

**SIGNATURE:** DANIEL J. THORNHILL

SEC

01/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date