

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

DOCUMENT# N17278

**FILED**  
**Apr 02, 2012**  
**Secretary of State**

**Entity Name:** LIBERAL FIRE FIGHTERS ASSOCIATION, INC. OF BROWARD COUNTY, FLORIDA

**Current Principal Place of Business:**

1612 NW 6 TH STREET  
FT. LAUDERDALE, FL 33311 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 100887  
FT. LAUDERDALE, FL 333100887 US

**New Mailing Address:**

**FEI Number:** 59-2741053

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RACHELS, RALPH  
1610 NW 24TH TERR  
FT LAUDERDALE, FL 33311 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: PD  
Name: RACHELS, RALPH  
Address: 1610 NW 24TH TERR  
City-St-Zip: FT LAUDERDALE, FL 33311

Title: V  
Name: DUNCAN, EDWARD  
Address: 509 NW 7 COURT  
City-St-Zip: HALLANDALE, FL 33009

Title: SD  
Name: FLOWERS, DEBRA  
Address: 1156 NW 46 AVE  
City-St-Zip: LAUDERHILL, FL 33313

Title: D  
Name: DANIELS, CEDRIC  
Address: 20625 NW 13 CT.  
City-St-Zip: MIAMI GARDEN, FL 33169

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: RALPH RACHELS

P

04/02/2012

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

\_\_\_\_\_  
Date