

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19098

FILED
Mar 09, 2005
Secretary of State

Entity Name: CAPE CORAL FRATERNAL ORDER OF POLICE-LODGE 33, INC.

Current Principal Place of Business:

1518 S E 14 ST
SUITE 9
CAPE CORAL, FL 33990 US

New Principal Place of Business:

Current Mailing Address:

1518 S E 14 ST
SUITE 9
CAPE CORAL, FL 33990 US

New Mailing Address:

FEI Number: 59-2706148 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FULOP, MARIE
2236 SE 27 TERR
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

WALKER, BENNETT
1518 SE 14TH ST
SUITE 9
CAPE CORAL, FL 33990 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: BENNETT WALKER

03/09/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: NEWLAN, DAVID
Address: 1012 SW 54 LN
City-St-Zip: CAPE CORAL, FL 33914

Title: P () Delete
Name: NEWLAN, DAVID
Address: 1832 SW 49 LN
City-St-Zip: CAPE CORAL, FL 33914

Title: ST () Delete
Name: GRAU, KURT
Address: 1312 S W 27 TER
City-St-Zip: CAPE CORAL, FL 33914

Title: T () Delete
Name: COX, DINA
Address: 929 SE 13 TR
City-St-Zip: CAPE CORAL, FL 33990

Title: S () Delete
Name: FULOP, MARIE
Address: 2236 SE 27 TERR
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: JOHNSON, SCOTT
Address: 1518 S E 14 ST #9
City-St-Zip: CAPE CORAL, FL 33990

Title: P (X) Change () Addition
Name: JOHNSON, SCOTT
Address: 1518 S E 14 ST #9
City-St-Zip: CAPE CORAL, FL 33914

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

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

Title: S (X) Change () Addition
Name: WALKER, BENNETT
Address: 1518 S E 14 ST #9
City-St-Zip: CAPE CORAL, FL 33990

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: BENNETT WALKER

S

03/09/2005

Electronic Signature of Signing Officer or Director

Date