

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21606

FILED  
Jan 20, 2012  
Secretary of State

**Entity Name:** CORAL GABLES FRATERNAL ORDER OF POLICE LODGE #7 INC.

**Current Principal Place of Business:**

265 SEVILLA AVE  
SECOND FLOOR  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

265 SEVILLA AVE  
SECOND FLOOR  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

**FEI Number:** 59-2158232      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BAUBLITZ, JOHN P  
265 SEVILLA AVE  
CORAL GABLES, FL 33134 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: BAUBLITZ, JOHN P  
Address: 265 SEVILLA AVE  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD  
Name: REINOSO, KLAUS  
Address: 265 SEVILLA AVE  
City-St-Zip: CORAL GABLES, FL 33134

Title: VD  
Name: HOFF, RANDY  
Address: 265 SEVILLA AVE  
City-St-Zip: CORAL GABLES, FL 33134

Title: TD  
Name: DIGIACOMO, DANIEL  
Address: 265 SEVILLA AVE  
City-St-Zip: CORAL GABLES, FL 33134

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: JOHN P. BAUBLITZ

PD

01/20/2012

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

\_\_\_\_\_  
Date