2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 10, 2008 08:00 A Secretary of State

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1. Entity Name

W.F. BRANTLEY LODGE 13, FRATERNAL ORDER OF POL. ICE, INC., OF HOMESTEAD



Principal Place of Business

SIGNATURE:

HOMESTEAD POLICE DEPT. 4 SOUTH KROME AVE. HOMESTEAD, FL 33030 Mailing Address

HOMESTEAD POLICE DEPT. 4 SOUTH KROME AVE. HOMESTEAD, FL 33030



01042008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number	Applied For
23-7585449	 Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

DONALD S. KENNEDO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDREW B. GINSBURG, ESQ. 2775 W. OKEECHOBEE RD HIALEAH, FL 33010

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								
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financ Trust Fund Contribution.	sing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDP KENNEDY, SCOTT 4 S. KROME AVE HOMESTEAD, FL 33030				V00000778706 01/11/08-80007-021 61.25			
TITLE NAME STREET ADDRESS CITY-SI-ZIP	S SURMAN, EDILIA 4 S KROME AVE. HOMESTEAD, FL 33030							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FOGLIA, THOMAS 4 S KROME AVE HOMESTEAD, FL 33030			DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_:		IN	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 like empowered.								