## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24113

FILED Jul 02, 2007 Secretary of State

Entity Name: FRATERNAL ORDER OF POLICE, FLORIDA STATE LODGE, DISTRICT FOUR, INC.

**Current Principal Place of Business:** New Principal Place of Business:

3175 S. CONGRESS AVE. 901 S. CONGRESS AVE.

SUITE 103A SUITE 054

PALM SPRINGS, FL 334612562 US PALM SPRINGS, FL 33461 US

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 22911 3175 S. CONGRESS AVE.

SUITE 103A W. PALM BEACH, FL 33416 291 US PALM SPRINGS, FL 334612562 US

FEI Number: 65-0010780 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

THOMAS & CLOUGH THOMAS & CLOUGH 324 N. LAKE SIDE CT 4512 NO FLAGLER DRIVE

WEST PALM BEACH, FL 33407 US SUITE 204

WEST PALM BEACH, FL 33407 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: 07/02/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

BURROUGHS, EDGAR E BURROUGHS, EDGAR E Name: Name:

421 DAVIS RD Address: 421 DAVIS RD Address: City-St-Zip: PLAM SPRINGS, FL 33461 City-St-Zip: PLAM SPRINGS, FL 334611605

Title: () Delete Title: () Change () Addition

ARMSTRONG, CATHY Name: Name: Address: 6288 BELVEDERA ROAD Address: City-St-Zip: WEST PALM BEACH, FL 33413 City-St-Zip:

Title: SD () Delete Title: SD (X) Change ( ) Addition

LICATA, MICHAEL Name: SHIFFLETT, KELLY Name: 3175 S. CONGRESS AVENUE SUITE 103A Address: Address: P. O. BOX 22911

City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: W. PALM BEACH, FL 33416

Title: TD () Delete Title: TD (X) Change ( ) Addition

BONNEY, THOMAS Name: Name: BONNEY, THOMAS

3175 SO CONGRESS AVENUE SUITE 103A Address: Address: P. O. BOX 22911

City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: W. PALM BEACH, FL 33416

Title: () Delete Title: VD (X) Change ( ) Addition

MARCHMAN, HENRY L FARON, CHRIS Name: Name: 691 SNEAD CIRCLE P. O. BOX 22911 Address: Address:

City-St-Zip: WEST PALM BEACH, FL 33413 City-St-Zip: WEST PALM BEACH, FL 33416

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EDGAR E BURROUGHS DIR 07/02/2007

Electronic Signature of Signing Officer or Director

Date