

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90037 049 ****61.25

DOCUMENT # N26792

1. Entity Name
**FRATERNAL ORDER OF POLICE, NORTHEASTER
LODGE #17 INC.**



Principal Place of Business
**1 SAWGRASS ROAD
JACKSONVILLE BEACH, FL 32250 US**

Mailing Address
**PO BOX 51140
JACKSONVILLE BEACH, FL 32240-1140 US**

50015901



01222005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
23-7585460

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MEYER, GEORGE F JR.
103 HARBOUR ISLAND CT
PONTE VEDRA BEACH, FL 32087**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ~~VP~~ ☐ Delete
NAME GUTHRIE, STEVE
STREET ADDRESS 1708 3RD ST
CITY-ST-ZIP NEPTUNE BEACH, FL 32266

TITLE VP ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~Trustee~~ ☐ Delete
NAME BROWN, PAUL
STREET ADDRESS 1328 14TH AVE N
CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250

TITLE Trustee ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME COLOGNE, E B
STREET ADDRESS 3 PALMWOOD CT
CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~STO~~ ☒ Delete
NAME MEYER, GEORGE F JR
STREET ADDRESS 103 HARBOUR ISLAND CT
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~President~~ ☐ Delete
NAME ANDERSON, RALPH
STREET ADDRESS 1875 BEACHSIDE CT
CITY-ST-ZIP ATLANTIC BEACH, FL 32233

TITLE President ☒ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~Treasurer~~ ☐ Delete
NAME MYERS, TIM
STREET ADDRESS 132 BOUGANVILLE DR
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

TITLE Treasurer ☒ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/05

904-273-4675