

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27978

FILED
Jan 13, 2004
Secretary of State

Entity Name: PROFESSIONAL FIREFIGHTERS & PARAMEDICS OF DELRAY BEACH, LOCAL 1842, I.A.F.F., INC.

Current Principal Place of Business:

P.O. BOX 583
DELRAY BEACH, FL 334477583 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 583
DELRAY BEACH, FL 334477583 US

New Mailing Address:

FEI Number: 23-7080387 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MIERZWA, MATTHEW J., JR
3900 WOODLAKE BLVD
S212
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

TABEEK, JAMES H PRES
P.O. BOX 583
DELRAY BEACH, FL 334470583 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: JAMES H. TABEEK

01/13/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TABEEK, JAMES H
Address: 501 W ATLANTIC AVE
City-St-Zip: DELRAY BCH, FL 334477583

Title: VPD () Delete
Name: WISE, MICHAEL
Address: 501 W ATLANTIC AVE
City-St-Zip: DELRAY BCH, FL 334477583

Title: SD () Delete
Name: DALTON, JAMES
Address: 501 W ATLANTIC AVE
City-St-Zip: DELRAY BEACH, FL 334477583

Title: T () Delete
Name: ROSE, ILENE
Address: 501 W. ATLANTIC AVE.
City-St-Zip: DELRAY BEACH, FL 334477583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: MCCLEARY, MICHAEL
Address: 501 W ATLANTIC AVE
City-St-Zip: DELRAY BCH, FL 334477583

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

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

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: JAMES H. TABEEK

PD

01/13/2004

Electronic Signature of Signing Officer or Director

Date