

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90212 042 ****70.00

DOCUMENT # *N28859*

1. Entity Name
*Fraternal Order of Police
Parkland Lodge # 110*



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business *Parkland, FL* 3. Mailing Address *Parkland, FL*
5933 W. Hillsboro Blvd 33067 *5933 W. Hillsboro Blvd 33067*

Suite, Apt. #, etc. *# 142* Suite, Apt. #, etc. *# 142*

City & State *Parkland, FL* City & State *Parkland, FL*

Zip *33067* Country *Broward* Zip *33067* Country *Broward*

4. FEI Number *65 0236124* Applied For Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name *Chris J. Rossi*
Street Address (P.O., Box Number is Not Acceptable) *9602 NW 73 St*
City *Tomball* FL Zip Code *33021*

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

**FEE IS \$61.25
Initial or Amended UBR**

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

TITLE	<i>D</i>	<i>President</i>
NAME		<i>Jonathan Greenberg</i>
STREET ADDRESS		<i>5933 W. Hillsboro Blvd #142</i>
CITY-ST-ZIP		<i>Parkland, FL 33067</i>
TITLE		<i>Vice President</i>
NAME		<i>Jeff Smith</i>
STREET ADDRESS		<i>5933 W. Hillsboro Blvd #142</i>
CITY-ST-ZIP		<i>Parkland, FL 33067</i>
TITLE	<i>D</i>	<i>Secretary</i>
NAME		<i>Chris J. Rossi</i>
STREET ADDRESS		<i>5933 W. Hillsboro Blvd #142</i>
CITY-ST-ZIP		<i>Parkland, FL 33067</i>
TITLE		<i>Treasurer</i>
NAME		<i>Teresa Castillo-Lopez</i>
STREET ADDRESS		<i>5933 W. Hillsboro Blvd #142</i>
CITY-ST-ZIP		<i>Parkland, FL 33067</i>
TITLE	<i>D</i>	<i>State Trustee</i>
NAME		<i>Phillip Khateel</i>
STREET ADDRESS		<i>5933 W. Hillsboro Blvd #142</i>
CITY-ST-ZIP		<i>Parkland, FL 33067</i>
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

04-15-03 954-753-5050

CR2E037B (12/02)

attachment



90104108

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 15, 2003

PARKLAND F.O.P. LODGE 110, INC.
5933 w hillsboro blvd
142
PARKLAND, FL 33067

SUBJECT: PARKLAND F.O.P. LODGE 110, INC.
Ref. Number: N28859

We have received your document for PARKLAND F.O.P. LODGE 110, INC. and check(s) totaling \$70.00. However, your check(s) and document are being returned for the following:

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 203A00022488

*If you have any Questions
Please Call - 954-726-9382 Thank You
C. Rossi*