

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N30284

1. Entity Name

FRATERNAL ORDER OF POLICE, COCONUT CREEK, LODGE

**FILED**  
**Sep 05, 2000 8:00 am**  
**Secretary of State**

09-05-2000 90045 050 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
 PO BOX 636646 PO BOX 636646  
 COCONUT CREEK FL 33063-6446 COCONUT CREEK FL 33063-6446

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0200920

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

TUCKER, GEORGE H.  
 7522 WILES RD STE 207  
 CORAL SPRINGS FL 33067

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**After September 13, 2000 min. will be \$236.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
 NAME WILLIAMS, GREGORY  
 STREET ADDRESS 561 SW 50 TERR  
 CITY-ST-ZIP MARGATE FL 33068 ☐ Delete

TITLE VPD  
 NAME Williams, Gregory  
 STREET ADDRESS 561 SW 50 TERR  
 CITY-ST-ZIP MARGATE FL 33068 ☒ Change ☐ Addition

TITLE VPD  
 NAME PARVIS, ANTHONY  
 STREET ADDRESS 4126 SW 65 AVE  
 CITY-ST-ZIP DAVIE FL 33314 ☐ Delete

TITLE PD  
 NAME Parvis, Anthony  
 STREET ADDRESS 3870 NW 21 ST  
 CITY-ST-ZIP Coconut Creek FL 33066 ☒ Change ☐ Addition

TITLE T  
 NAME JAMER, THOMAS  
 STREET ADDRESS 1111 SW 40 AVE  
 CITY-ST-ZIP COCONUT CREEK FL ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE T  
 NAME HARRISON, WILLIAM  
 STREET ADDRESS 5465 NW 41 TERR  
 CITY-ST-ZIP COCONUT CREEK FL 33073 ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

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 empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/28/2000

CR2E037 (5/00)