

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40173

FILED
Apr 14, 2009
Secretary of State

Entity Name: ALTAMONTE SPRINGS LODGE # 121 FRATERNAL ORDER OF POLICE INC.

Current Principal Place of Business:

225 NEWBURYPORT AVE.
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

225 NEWBURYPORT AVE.
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 59-2987167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOVER, DANIEL C
175 NEWBURYPORT AVE
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

HOOVER, DANIEL C
225 NEWBURYPORT AVE
ALTAMONTE SPRINGS, FL 32701 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: _____

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SMUTZ, DANIEL
Address: 225 NEWBURYPORT AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: TD () Delete
Name: PERRY, JAMES
Address: 225 NEWBURYPORT AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: PD () Delete
Name: NUZZI, WILLIAM E
Address: 225 NEWBURYPORT AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: JAMES A PERRY

TD

04/14/2009

Electronic Signature of Signing Officer or Director

Date