

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 27, 2009  
Secretary of State

DOCUMENT# N40528

**Entity Name:** PALM BEACH LODGE NO. 19, FRATERNAL ORDER OF POLICE EDUCATIONAL ASSISTANCE FUND, INC.

**Current Principal Place of Business:**

5876 OKEECHOBEE BLVD  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3422  
PALM BEACH, FL 33480

**New Mailing Address:**

FEI Number: 65-0234268      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLOUGH, RANDY M  
4512 NORTH FLAGLER DRIVE  
SUITE 204  
WEST PALM BEACH, FL 33407 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HESS, FRED  
Address: 345 S. COUNTY RD  
City-St-Zip: PALM BEACH, FL 33480

Title: V ( ) Delete  
Name: PAGAN, MICHELE  
Address: 345 S. COUNTY RD  
City-St-Zip: PALM BEACH, FL 33480

Title: S (X) Delete  
Name: RUFER, EDWARD  
Address: 345 S. COUNTY RD  
City-St-Zip: PALM BEACH, FL 33480

Title: T ( ) Delete  
Name: SIMMONS, RONALD  
Address: 369 PALMETTO STREET  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: T (X) Delete  
Name: BURROUGHS, EDGAR  
Address: 421 DAVIS ROAD  
City-St-Zip: PALM SPRINGS, FL 33461

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PAGAN, MICHELE  
Address: 345 S. COUNTY RD  
City-St-Zip: PALM BEACH, FL 33480

Title: V (X) Change ( ) Addition  
Name: RUFER, EDWARD  
Address: 345 S. COUNTY RD  
City-St-Zip: PALM BEACH, FL 33480

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: RONALD SIMMONS

T

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date