2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N40651

1. Entity Name

FORT LAUDERDALE POLICE OFFICER'S ASSOCIATION, IN



Jan 27, 2003 8:00 am Secretary of State 01-27-2003 90553 019 ****61.25

FILED

Principal Place of Business Mailing Address 4500 S.W. 13TH STREET P. O. BOX 14066 FT. LAUDERDALE FL 33317-6801 FT LAUDERDALE FL 33302 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-6004309 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODDY, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 1300 W BROWARD BLVD FORT LAUDERDALE FL 33312 City 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 Fiorida. 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TD TITLE Delete TITLE Addition FUNKEY, CHARLES NAME NAME 1300 W BROWARD BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ■ Addition RODDY, MICHAEL NAME 1300 W BROWARD BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33312 CITY-ST-ZIP TITLE 🔲 Delete j TITLE Change ☐ Addition SWENSON, WAYNE NAME NAME 1300 W BROWARD BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-ZIP CITY-ST-ZIP ۷D TITLE ☐ Delete TITLE ☐ Change ☐ Addition GABRIEL, JAMES NAME NAME 1300 W BROWARD BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

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 empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

954-828-5647