

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43778

FILED  
Apr 07, 2009  
Secretary of State

**Entity Name:** TEMPLE TERRACE FRATERNAL ORDER OF POLICE LODGE #101, INC.

**Current Principal Place of Business:**

11250 N. 56TH STREET  
TEMPLE TERRACE, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

11250 N. 56TH STREET  
TEMPLE TERRACE, FL 33617

**New Mailing Address:**

P.O. BOX 290302  
TAMPA, FL 33687

**FEI Number:** 23-7431552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JEFFOROS, CHRISTOPHER M  
11250 N. 56TH ST  
TEMPLE TERRACE, FL 33617 US

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

BOSS, ROBERT M  
410 N GLEN ARVEN AVE  
TEMPLE TERRACE, FL 33617 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: ROBERT M BOSS

04/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BOSS, ROBERT  
Address: 11250 N. 56TH STREET  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VD ( ) Delete  
Name: JORDAN, GREG  
Address: 11250 N 56TH  
City-St-Zip: TEMPLE TERRACE, FL

Title: SD ( ) Delete  
Name: DUBORD, LISA  
Address: 11250 N 56TH ST  
City-St-Zip: TEMPLE TERRACE, FL

Title: TD ( ) Delete  
Name: JEFFORDS, CHRISTOPHER M  
Address: 11250 N. 56TH ST  
City-St-Zip: TEMPLE TERRACE, FL 33617

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

Title: PD (X) Change ( ) Addition  
Name: BOSS, ROBERT  
Address: 410 N GLEN ARVEN AVENUE  
City-St-Zip: TEMPLE TERRACE, FL 33617

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

Title: SD (X) Change ( ) Addition  
Name: DUBORD, LISA  
Address: PO BOX 290302  
City-St-Zip: TAMPA, FL 33687

Title: TD (X) Change ( ) Addition  
Name: ALBANO, KEN  
Address: 11250 N. 56TH ST  
City-St-Zip: TEMPLE TERRACE, FL 33617

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: ROBERT M BOSS

PD

04/07/2009

Electronic Signature of Signing Officer or Director

Date