

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43778

**FILED**  
**Apr 18, 2011**  
**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:**

P.O. BOX 290302  
TAMPA, FL 33687

**New Mailing Address:**

**FEI Number:** 23-7431552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOSS, ROBERT M  
410 N GLEN ARVEN AVE  
TEMPLE TERRACE, FL 33617 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: PD  
Name: BOSS, ROBERT  
Address: 410 N GLEN ARVEN AVENUE  
City-St-Zip: TEMPLE TERRACE, FL 33617

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

Title: SD  
Name: DUBORD, LISA  
Address: PO BOX 290302  
City-St-Zip: TAMPA, FL 33687

Title: TD  
Name: LOPEZ, CARLOS  
Address: 11250 N. 56TH ST  
City-St-Zip: TEMPLE TERRACE, FL 33617

I hereby 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 all other like empowered.

SIGNATURE: ROBERT M BOSS

PD

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date