

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44439

FILED
Apr 23, 2008
Secretary of State

Entity Name: CHARLES E. BROOKFIELD LODGE #86, FRATERNAL ORDER OF POLICE, INC.

Current Principal Place of Business:

414A FAIRLANE AVE.
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

414A FAIRLANE AVE.
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-3059059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHUH, PAMELA
4146 MONTROSE CT.
ORLANDO, FL 32812 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 () Delete
Name: MARTIN, GERALDINE
Address: 30327 CR435
City-St-Zip: MT. PLYMOUTH, FL 32776

Title: VPT () Delete
Name: SEVER, FRANKLIN
Address: 1010 SAN LUIS
City-St-Zip: OCOEE, FL 34761

Title: ST () Delete
Name: SCHUH, PAMELA
Address: 4146 MONTROSE CT
City-St-Zip: ORLANDO, FL 32812

Title: T () Delete
Name: STOREY, TIM
Address: 4118 FIREWATER COURT
City-St-Zip: ORLANDO, FL 32829

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WOOTEN, HAROLD
Address: 215 HEDGEWOOD AVE.
City-St-Zip: DELTONA, FL 32738

Title: VPT (X) Change () Addition
Name: BERRISFORD, JOHN
Address: 4739 LAZY H
City-St-Zip: CHRISTMAS, FL 32709

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: PAMELA SCHUH

SEC

04/23/2008

Electronic Signature of Signing Officer or Director

Date