FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment

Mar 21, 2001 8:00 am **DOCUMENT # N49559** Secretary of State 1. Entity Name THE FRATERNAL ORDER OF POLICE ASSOCIATES, LODGE 03-21-2001 90056 007 ****61.25 Principal Place of Business Mailing Address 17201 HUNTINGTON PARKWAY P.O. BOX 3868 **BOCA RATON FL 33496 BOCA RATON FL 33427** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0342214 Not Applicable Zip \$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 Name Street Address (P.O. Box Number is Not Acceptable) STONE, NORBERT 6990 CALLE DEL PAZ **BOCA RATON FL 33433** 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 Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61,25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DS TITLE TITLE ☐ Addition ☐ Delete STAVITSKY, BURTON NAME NAME STREET ADDRESS 5034 SUFFOLK DRIVE STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33496** CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ☐ Change STONE, NORBERT -NAME STREET ADDRES 6990 CALLE DEL PAZ STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP CITY-ST-ZIP DT TITLE ☐ Delete TITLE ☐ Change ☐ Addition SIGEL. STUART NAME STREET ADDRESS 4431 WOODFIELD BLVD. STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33434** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME FEUERMAN, GEORGE NAME STREET ADDRESS 17201 HUNTINGTON PARKWAY STREET ADDRESS CITY-ST-7IP **BOCA RATON FL 33496** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HERASYMCHUCK, ALEXANDER NAME NAME STREET ADDRESS 1123 S.W. 13TH DRIVE STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33486** CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7tP 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 of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if the same