

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

FILED
Jan 22, 2003 8:00 am
Secretary of State

01-22-2003 90137 020 ****61.25

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1. Entity Name

**CONSOLIDATED LAW ENFORCEMENT OFFICERS, FRATERNAL
ORDER OF POLICE, LODGE 21, INC.**

Principal Place of Business

**7501 W. OAKLAND PARK BLVD #102
LAUDERHILL FL 33319**

Mailing Address

**P.O. BOX 1403
FT. LAUDERDALE FL 33301**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0414931**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KLAUSNER, ROBERT D
6565 TAFT ST.
HOLLYWOOD FL 33024**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. 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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **PAYTON, AL**
STREET ADDRESS **7501 WEST OAKLAND PARK BLVD #102**
CITY-ST-ZIP **LAUDERDALE FL 33319**

TITLE **SD** ☐ Delete
NAME **BONGIORNO, DANA**
STREET ADDRESS **7501 WEST OAKLAND PARK BLVD #102**
CITY-ST-ZIP **LAUDERDALE FL 33319**

TITLE **TD** ☐ Delete
NAME **FREDETTE, JEANNE**
STREET ADDRESS **7501 WEST AOKLAND PARK BLVD #102**
CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE **VP** ☐ Delete
NAME **BOWEN, SCOTT**
STREET ADDRESS **7501 WEST OAKLAND PARK BLVD #102**
CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeanne M. Fredette
1/16/2003

954-746-2719

CR2E037 (10/02)