

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90016 027 ****61.25

DOCUMENT # N93000003658

1. Entity Name

NORTH MIAMI BEACH POLICE OFFICERS ASSOCIATION, I

Principal Place of Business

16901 NE 19 AVE
 N MIAMI BCH FL 33162
 US

Mailing Address

2960 AVENTURA BLVD
 AVENTURA FL 33180
 US

2. Principal Place of Business

3. Mailing Address

19200 W Country Club Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Aventura, FL

Zip

Country

Zip

Country

33180

US

4. FEI Number

65-0402410

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FOGELGREN, DEIDRE
 2960 AVENTURA BLVD
 AVENTURA FL 33180

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.

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
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME SILBERMAN, RICHARD
 STREET ADDRESS 16901 NE 19TH AVE
 CITY-ST-ZIP N MIAMI BCH FL 33162

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

TITLE VPD ☐ Delete
 NAME MAUER, MICHAEL
 STREET ADDRESS 2960 AVENTURA BLVD
 CITY-ST-ZIP AVENTURA FL 33180

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 19200 W Country Club Dr
 CITY-ST-ZIP AVENTURA FL 33180

TITLE SD ☐ Delete
 NAME GOMER, LARRY
 STREET ADDRESS 16901 NE 19 AVE
 CITY-ST-ZIP N MIAMI BCH FL

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

TITLE TRES ☐ Delete
 NAME FOGELGREN, DEIDRE A
 STREET ADDRESS 2960 AVENTURA BLVD
 CITY-ST-ZIP AVENTURA FL 33180

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 19200 W Country Club Dr
 CITY-ST-ZIP Aventura FL 33180

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 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:

Deidre A Fogelgren
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-01 3054668977
 Date Daytime Phone #

CR2E037 (10/00)