

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001187

FILED
Apr 12, 2009
Secretary of State

Entity Name: FRATERNAL ORDER OF POLICE, LODGE NO. 42, INC.

Current Principal Place of Business:

451 NW 70TH TERRACE
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

451 NW 70TH TERRACE
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 23-7585474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLIGNANI, JOSEPH
451 NW 70TH TERRACE
PLANTATION, FL 33317 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: HANLON, MICHAEL
Address: 451 NW 70TH TERRACE
City-St-Zip: PLANTATION, FL

Title: VD () Delete
Name: MASSEO, ANDREW
Address: 451 NW 70 TERR
City-St-Zip: PLANTATION, FL

Title: S () Delete
Name: TOMAN, PHILLIP
Address: 451 NW 70TH TERRACE
City-St-Zip: PLANTATION, FL 33317

Title: T () Delete
Name: GALLIGNANI, JOSEPH
Address: 451 NW 70TH TERRACE
City-St-Zip: PLANTATION, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSEPH GALLIGNANI

TREA

04/12/2009

Electronic Signature of Signing Officer or Director

Date