FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

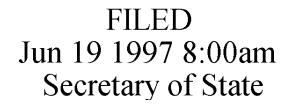
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COOPER CITY PROFESSIONAL FIRE FIGHTERS BENEVOLEN T ASSOCIATION, INC.

Principal Place of Business

Mailing Address





10550 STIRLING RD. COOPER CITY FL \$3026		10550 STIRLING RD. COOPER CITY FL 33026-3405		
				3. Date Incorporated or Qualified 3a. Date of Last Report 03/07/1994 07/08/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26		65-0567312 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Country	Zip I	Country	Trust Fund Contribution
24	25	— ·	30	Florida Statutes
				10. Name and Address of New Registered Agent
81 Name Geraldine T. Kon				
				Address (P.O. Box, Number is Not Acceptable)
10550 STIRLING RD.			350 Shking Road	
COOPER CITY FL 33026			ollywood m.	
			84 City	
		LOAD AFON FOLLAR DELA	C	680er City, 1 FL 133026
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered				
agent. I am lamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.				
SIGNATURE _	Signature, typed or printed name of registered agent	and title it applicable (NOTE	Registered Agent signature	Treasurer 2/24/97
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETÉ	1.1 TITLE	Change Addition
NAME	BICKMAN, CHARLES	•	1.2 NAME	DUAR VALIENTE
STREET ADDRESS	9469 S.W. 52 STREET		1.3 STREET ADDRESS	Bysi NW 145T
CITY-ST-ZIP	COOPER CITY FL 33328		1.4 CITY-ST-ZIP	Pembroke Pines Pl 33024
TITLE	SD	DELETE	2.1 TITLE	SD Change Addition
NAME	BARTLET, KEVIN	·	2.2 NAME	10650 STIRLING RD
STREET ADDRESS	10550 STIRLING RD.		2 3 STREET ADDRESS	COOPER CUTY PI. 33826
CITY-ST-ZIP	COOPER CITY FL 33026	N	2 4 City-St-Zip	V
TITLE	TD	DELETE	31 THILE	Change Addition
NAME	ROBERTS, TERI		3 2 NAME	Jeraldine Kon
STREET ADDRESS	10550 STIRLING RD.		3 3 STREET ADDRESS	1300 N 27 AVE
CITY-ST-ZIP	COOPER CITY FL 33026	Drutti	3.4. CITY - ST - ZIP	Aphywood, Fl. 33020
TITLE NAME		☐ DELETE	4.1 TITLE 4. 2 NAME	Change Addition
STREET ADDRESS				
CITY-ST-ZIP			4.3 STREET ADDRESS	
TITLE		☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME		<u> </u>	5.2 NAME	C onergy C Addition
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	· • •
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

laulen campulan son