

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000005674

**FILED**  
**Jan 14, 2010**  
**Secretary of State**

**Entity Name:** FRATERNAL ORDER OF POLICE, SOUTH FLORIDA FEDERAL LODGE #127, INC.

**Current Principal Place of Business:**

11620 SW 10TH STREET  
PEMBROKE PINES, FL 330254330 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 821808  
SOUTH FLORIDA, FL 330821808 US

**New Mailing Address:**

**FEI Number:** 65-0660600

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KLAUSNER, ROBERT D  
6565 TAFT STREET  
SUITE 200  
HOLLYWOOD, FL 33024 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: P  
Name: SANTIAGO, THOMAS J  
Address: 11620 SW 10TH ST  
City-St-Zip: PEMBROKE PINES, FL 330254330 US

Title: VD  
Name: RIVERA, ROBERT  
Address: P O BOX 590811 N/A  
City-St-Zip: MIAMI, FL 331521019 US

Title: SD  
Name: SANTIAGO, THOMAS J  
Address: 11620 SW 10 ST  
City-St-Zip: PEMBROKE PINES, FL 330254330 US

Title: TD  
Name: RALEIGH, DWIGHT A  
Address: PO BOX 52-0673  
City-St-Zip: MIAMI, FL 331520673 US

I hereby 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 all other like empowered.

SIGNATURE: THOMAS J. SANTIAGO

PRES

01/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date