FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra 🕞 Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N96000002430 (4)

FIRE CHIEFS' ASSOCIATION OF BROWARD COUNTY, INC.

Principal Place of Business Mailing Address

FILED Jun 25 1997 8:00am Secretary of State



8915 MIRAMAR PARKWAY MIRAMAR FL 33025				8915 MIRAMAR PARKWAY MIRAMAR FL 33025-4128							
								05/03/1996	Date of Last R	eport	
2. Principal Place of Business				2a. Mailing Address				4. FEI Number	Ap	plied For	
21				26				59-2480099] No	t Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			28	t				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24				Zip Count 29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒️ No			
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent				
						81	Name				
MURPHY, MICHAEL D 8915 MIRAMAR PARKWAY						82	Street Address (P.O. Box Number is Not Acceptable)				
-MIRAMAR FL 33025				1							
				-			City		85 Zip (Code	
•						84	Oity	F	L 103 240 (0000	
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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE				· · · · · · · · · · · · · · · · · · ·		····					
	Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS				(NOTE: Registered Agent signature red		nt signature	required when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A		DC INL 10	
12.		OFFICERS	AND DIRE	DELETÉ	1.1 1	ITI F	_	ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
NAME				C beeck	1.2 N		Ð	Suculu Banaalla	onunge	INCITION LAN	
							4000000	Frank Porcella			
STREET ADDRESS	`]						ADDRESS	600 N. Rock Island Road			
CITY-ST-ZIP TITLE				DELETE 2.1 TI			T-ZIP	Margate, Florida 33063	Change	X Addition	
				22 N			7	Michael Murphy	Onlings	21 71001001	
NAME	c						ADDDDDD	8915 Miranar Parkway			
STREET ADDRESS				2.33			ADDRESS	Miramar, Florida 33025			
CITY-ST-ZIP TITLE	 			DELETE 3.1 TI					Change	Addition	
NAME					3.2 N		D	Bruce Moeller 2601 W. Broward Boulevard		X	
STREET ADDRESS							ADDRESS	Ft. Lauderdale, Florida 33	212		
							AUUNESS ST-ZIP	ic. Lauderdaie, riorida 33	JIZ		
CITY-\$T-ZIP TITLE		 		DELETE	3.4. U			John Daniell Danidson	Change	X Addition	
NAME						NAME	D	John Darrell Davidson	- Dinnigo		
STREET ADDRESS							ADDRESS	121 S.W. 3rd Street			
								Hallandale, Florida 33009			
CITY-ST-ZIP TITLE	 		······································	☐ DELETE	5.1 T	ITY-S	1-212		Change	Addition	
NAME					5.1 N				criarigo		
							ADORESS				
STREET ADDRESS											
CITY-ST-ZIP TITLE				☐ DELETE	5.4 C	ITY-S	1 - £1P	 	Change	Addition	
					6.2 N				CI-dilige	LLI FAUGILION	
NAME OTDEET ADDRESS							4000000				
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			6.4 C	ITY-S	T-ZIP				

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.

5/21/97