2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N96000005498

1. Entity Name

HOLLYWOOD FIREFIGHTERS' RETIREES ASSOCIATION, INCORPORATED



Principal Place of Business

2741 STIRLING ROAD HOLLYWOOD, FL 33312 Mailing Address

2741 STIRLING ROAD HOLLYWOOD, FL 33312



FILED

Jan 22, 2007 08:00 AM Secretary of State

DO NOT WRITE IN THIS SPACE

01172007 No Chg-NP CR2E037 (4/06)

4. FEI Number		Applied For
65-0705451		Not Applicable
5. Certificate of Status Desired	\$8.75 Fee Regi	Additional

6. Name and Address of Current Registered Agent

BRITO, RICH 2741 STIRLING RD HOLLYWOOD, FL 33312

DO NOT WRITE IN THIS SPACE

						•	
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or r	egistered agent, or bo	th, in the State of Flori	da. I am familiar	with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered	Agent signature	required when reinstating)		DATE	
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS	,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BRITO, RICHARD J 107 CAPTAINS COURT ISLAMORADA, FL 33020		e e				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GEISLER, GEORGE 88500 OVERSEAS HIGHWAY #509 TAVERNIER, FL 33070				0000005 01/23/07-8	,95429 30079-805 ₋	61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HALL, PAT 5508 VAN BUREN STREET HOLLYWOOD, FL 33021				NOT W		•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEADOWS, ARTHUR 15030 NE 85 PLACE SILVER SPRINGS, FL 34488				THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				A C P P P P P			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			, , , ,		3		ds s s
12. I hereby	certify that the information supplied with this for this report or supplemental report is true	filing does not qualify for the ext and accurate and that my signat	emptions co ture shall ha	ntained in Chapter 11 ve the same legal effe	 Florida Statutes. I fe ct as if made under oa 	urther certify that ath; that I am an o	the information fficer or director

12. Thereby certify that the information supplied with this fining does not qualify for the examplions contained in Chapter 119, information 119, information supplied with this fining does not qualify 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:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

01/17/2007 (954)967-433