

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Oct 07 1998 8:00am
Secretary of State

DOCUMENT # N96000006442 (5)

1. Corporation Name

FRATERNAL ORDER OF POLICE, ROCKLEDGE LODGE #106,
INC.

Principal Place of Business

Mailing Address

563 BARTON BOULEVARD #20
ROCKLEDGE FL 32955

POST OFFICE BOX 561181
ROCKLEDGE FL 32955

3. Date Incorporated or Qualified

12/12/1996

4. FEI Number

59-3201892

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FAIRBANKS, DENNIS F
301 MAGNOLIA AVENUE
MERRITT ISLAND FL 32952

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME WHELAN, RODNEY
STREET ADDRESS 123 BARTOW BLVD.
CITY-ST-ZIP ROCKLEDGE FL

☐ DELETE

TITLE D
NAME PIRSON, DONALD
STREET ADDRESS 123 BARTOW BLVD.
CITY-ST-ZIP ROCKLEDGE FL

☐ DELETE

TITLE D
NAME CRAWFORD, CHARLES
STREET ADDRESS 123 BARTOW BLVD.
CITY-ST-ZIP ROCKLEDGE FL

☐ DELETE

TITLE D
NAME ROMAN, SHARON
STREET ADDRESS 123 BARTOW BLVD.
CITY-ST-ZIP ROCKLEDGE FL

☐ DELETE

TITLE P
NAME CRAWFORD, CHARLES
STREET ADDRESS 123 BARTOW BLVD.
CITY-ST-ZIP ROCKLEDGE FL

☒ DELETE

TITLE VP
NAME WHELAN, RODNEY
STREET ADDRESS 123 BARTOW BLVD.
CITY-ST-ZIP ROCKLEDGE FL

☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T/D
1.2 NAME
1.3 STREET ADDRESS 123 BARTON AV
1.4 CITY-ST-ZIP

☒ Change

☐ Addition

2.1 TITLE PRESIDENT
2.2 NAME PIRSON, DONALD
2.3 STREET ADDRESS 123 BARTON AV
2.4 CITY-ST-ZIP

☒ Change

☐ Addition

3.1 TITLE TR/D
3.2 NAME CRAWFORD, CHARLES
3.3 STREET ADDRESS 123 BARTON AV
3.4 CITY-ST-ZIP ROCKLEDGE, FL. 32955

☒ Change

☐ Addition

4.1 TITLE T/D
4.2 NAME ROMAN, SHARON
4.3 STREET ADDRESS 123 BARTON AV
4.4 CITY-ST-ZIP ROCKLEDGE, FL. 32955

☒ Change

☐ Addition

5.1 TITLE VP/DIRECTOR
5.2 NAME IVETTE GOMEZ
5.3 STREET ADDRESS 123 BARTON AV
5.4 CITY-ST-ZIP ROCKLEDGE, FL. 32955

☐ Change

☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)