

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000003256

1. Entity Name

LAW ENFORCEMENT EMERALD SOCIETY OF SOUTH FLORIDA

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90079 023 ****61.25

Principal Place of Business

10031 N.W. 27TH TERRACE
MIAMI FL 33172

Mailing Address

10031 N.W. 27TH TERRACE
MIAMI FL 33172-1315

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0773129

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAYES, SEAN
10031 N.W. 27 TERRACE
MIAMI FL 33172

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME HILL, ARTHUR E
STREET ADDRESS 3698 N UNIVERSITY DR
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE PD ☒ Change ☐ Addition
NAME Sean Hayes
STREET ADDRESS 10031 N.W. 27th Terrace
CITY-ST-ZIP Miami, Florida 33172

TITLE VD ☒ Delete
NAME MCDERMOTT, MICHAEL
STREET ADDRESS 7935 SW 97 PL
CITY-ST-ZIP MIAMI FL 33156

TITLE VD ☒ Change ☐ Addition
NAME Frank J. Moran
STREET ADDRESS 19466 N.W. 24th Place
CITY-ST-ZIP Pembroke Pines, Florida 33029

TITLE VD ☒ Delete
NAME HAYES, SEAN
STREET ADDRESS 4940 SW 87TH COURT
CITY-ST-ZIP MIAMI FL 33165

TITLE VD ☒ Change ☐ Addition
NAME Joan R. Clarke
STREET ADDRESS 1085 SW 112th Terrace
CITY-ST-ZIP Pembroke Pines, Florida 33025

TITLE SD ☐ Delete
NAME HICKEY, MAUREEN D
STREET ADDRESS 4940 SW 87TH COURT
CITY-ST-ZIP MIAMI FL 33165

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME EATON, BRENT
STREET ADDRESS 11501 NW 26TH ST
CITY-ST-ZIP PLANTATION FL 33323

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HARRINGTON, DONALD F SR
STREET ADDRESS 1517 DELGADO AVE
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)