## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N97000005246

FILED Feb 06, 2003 Secretary of State

Entity Name: FRATERNAL ORDER OF POLICE, INDIAN RIVER SHORES LODGE #79, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

INDIAN RIVER SHORES, FL 32963

**Current Mailing Address: New Mailing Address:** 

P O BOX 8055 6001 N. A1A

P O BOX 8055 INDIAN RIVER SHORES, FL 32963

INDIAN RIVER SHORES, FL 32963

FEI Number: 59-1882680 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

NOLAN, BRIAN J 6001 N A1A

INDIAN RIVER SHORES, FL 32963 US

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:

Date

Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition MOONEY, TODD MOONEY, TEDD D Name: Name:

6001 N. A1A Address: 6001 N. A1A Address:

City-St-Zip: INDIAN RIVER SHORES, FL 32963 City-St-Zip: INDIAN RIVER SHORES, FL 32963

Title: TD Title: ( ) Delete () Change () Addition

Name: BALLAS, EDWARD Name: Address: 6001 N. A1A Address: City-St-Zip: INDIAN RIVER SHORES, FL 32963 City-St-Zip:

Title: PD() Delete Title: () Change () Addition

NOLAN, BRIAN Name: Name: Address: 6001 N A1A Address: City-St-Zip: INDIAN RIVERS SHORES, FL 32963 City-St-Zip:

Title: VD () Delete Title: VD (X) Change ( ) Addition

Name: RICHTER, JOE Name: PUCHALA, LOU

Address: 6001 A1A Address: 6001 A1A

City-St-Zip: INDIAN RIVER SHORES, FL 32963 City-St-Zip: INDIAN RIVER SHORES, FL 32963

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: TEDD D. MOONEY SD 02/06/2003