2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000000388

FILED
Aug 24, 2000 8:00 am
Secretary of State

08-24-2000 90030 041 ****61.25

1. Entity Name

DEERFIELD BEACH FIREFIGHTERS AND PARAMEDICS BENE

Principal Place of Business
~~P. O. BOX 1202~~
~~DEERFIELD BEACH FL 33443~~

Mailing Address
~~P. O. BOX 1202~~
~~DEERFIELD BEACH FL 33443-1202~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
P.O. Box 176
Suite, Apt. #, etc.

3. Mailing Address
PO Box 176
Suite, Apt. #, etc.

City & State: Deerfield Beach, FL
Zip: 33443-0176 Country:

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Zip: 33443-0176 Country:

4. FEI Number: NOT APPLICATION — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Mierzwa: Assoc.
~~BRUCE, MARGARET M~~
3900 WOODLAKE BLVD., SUITE 212
LAKE WORTH FL 33463

7. Name and Address of New Registered Agent

Name: Mierzwa & Associates, P.A.
Street Address (P.O. Box Number is Not Acceptable): Attn: F. Keith Dubin, Esquire
3900 Woodlake Blvd, Suite 212
City: Lake Worth FL Zip Code: 33463-3045

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: Keith Dubin — F. Keith Dubin, Esquire — 8/21/00
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 NAME PELLITTERI, MATT STREET ADDRESS 1164 SE 1ST TERR. CITY-ST-ZIP DEERFIELD BEACH FL 33441	☐ Delete	TITLE D NAME Matt Pellitteri Pres. STREET ADDRESS 849 N.E. 4th St. CITY-ST-ZIP Deerfield Bch, Fl 33441	☒ Change ☐ Addition
TITLE SD NAME KASPER, JOE STREET ADDRESS 6845 NW 4TH CT. CITY-ST-ZIP PLANTATION FL 33317	☒ Delete	TITLE D NAME Vice President Gail Knapp STREET ADDRESS 264 SE 6 Ave CITY-ST-ZIP Deerfield Beach, FL 33441	☒ Change ☒ Addition
TITLE TD NAME RAY, TOM STREET ADDRESS 35 SE 8TH AVE. CITY-ST-ZIP DEERFIELD BEACH FL 33441	☒ Delete	TITLE D NAME Secretary Cantalupo Alex STREET ADDRESS 1256 SE 8 ST CITY-ST-ZIP Deerfield Bch Fl 33441	☐ Change ☒ Addition
TITLE D NAME QUITONI, JOHN STREET ADDRESS 153 NW 40TH TERR. CITY-ST-ZIP DEERFIELD BEACH FL 33442	☐ Delete	TITLE T NAME Same STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE D NAME CUCCINIELLO, DAN STREET ADDRESS 371 SW 30TH TERR. CITY-ST-ZIP DEERFIELD BEACH FL 33442	☒ Delete	TITLE T NAME CROFUTT, SEAN STREET ADDRESS 170 SW 32 AVE CITY-ST-ZIP DEERFIELD Bch, FL 33442	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE TD NAME Mark Griffith Treasure STREET ADDRESS 1061 SW 20 ST CITY-ST-ZIP Boca Raton, FL 33486	☐ Change ☒ Addition

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (9/99)