

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719448

**Entity Name:** FORT LAUDERDALE PROFESSIONAL FIREFIGHTERS INC. IAFF  
LOCAL 765

**FILED**  
**Jan 20, 2015**  
**Secretary of State**  
**CC1088124114**

**Current Principal Place of Business:**

309 1/2 SW 26TH ST.  
FORT LAUDERDALE, FL 33315

**Current Mailing Address:**

309 1/2 SW 26TH ST.  
FORT LAUDERDALE, FL 33315

**FEI Number: 59-1498225**

**Certificate of Status Desired: No**

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

MATTHEW ADAMS  
309 1/2 SW 26 STREET  
FORT LAUDERDALE, FL 33315 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BAYNE, JEFFERY S  
Address        309 1/2 SW 26 STREET  
City-State-Zip: FORT LAUDERDALE FL 33315

Title            TREASURER  
Name            ADAMS, MATTHEW  
Address        309 1/2 SW 26 STREET  
City-State-Zip: FORT LAUDERDALE FL 33315

Title            VP  
Name            SALZANO, MICHAEL  
Address        309 1/2  
City-State-Zip: FORT LAUDERDALE FL 33315

Title            SECRETARY  
Name            SIMAC, STEVE  
Address        309 1/2 SW 26 STREET  
City-State-Zip: FORT LAUDERDALE FL 33315

*I hereby 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 all other like empowered.*

**SIGNATURE: MATTHEW ADAMS**

**TREASURER**

**01/20/2015**

Electronic Signature of Signing Officer/Director Detail

Date