#### 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.

TREASURER

#### SIGNATURE: JUSTIN YARBOROUGH

KRUMENACKER, MARK

P.O. BOX 450086 SUNRISE FL 33345

Electronic Signature of Signing Officer/Director Detail

PLANTATION, FL 33322 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:

Name Address

City-State-Zip:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	PRES	Title	2ND VP
Name	KREGE, ROGER	Name	FORTEZA, DAVID
Address	1856 N NOB HILL RD ,#231	Address	P.O. BOX 450086
City-State-Zip:	PLANTATION FL 33322	City-State-Zip:	SUNRISE FL 33345
Title	IMMD	Title	TRES
Name	BROKSCH, MIKE	Name	YARBOROUGH, JUSTIN
Address	P.O. BOX 450086	Address	P.O. BOX 450086
City-State-Zip:	SUNRISE FL 33345	City-State-Zip:	SUNRISE FL 33345
Title	SECR	Title	VP
Name	ZINN, JASON	Name	HODGERS, BENJAMIN
Address	P.O. BOX 450086	Address	P.O. BOX 450086
City-State-Zip:	SUNRISE FL 33345	City-State-Zip:	SUNRISE FL 33345
Title	SGT AT ARMS		

# 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732607

#### Entity Name: CITY OF SUNRISE FRATERNAL ORDER OF POLICE, INC.

**Current Principal Place of Business:** 

1856 N NOB HILL RD #231 PLANTATION, FL 33322

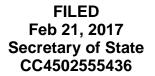
## **Current Mailing Address:**

P.O. BOX 450086 SUNRISE, FL 33345 US

## FEI Number: 65-0149464

Name and Address of Current Registered Agent:

KREGE, ROGER A 1844 N NOB HILL RD #231



Certificate of Status Desired: No

Date

02/21/2017 Date