

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007653

Entity Name: NORTH MIAMI BEACH POLICE OFFICERS' ASSOCIATION
LOCAL 6005, INC.**FILED**
Feb 20, 2018
Secretary of State
CC9810009209**Current Principal Place of Business:**16901 NE 19 AVENUE
NORTH MIAMI BEACH, FL 33162**Current Mailing Address:**PO BOX 600124
NORTH MIAMI BEACH, FL 33162**FEI Number: 65-1056107****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RODRIGUEZ, SANDY TREAS
C/O CITY OF NORTH MIAMI BEACH PD
16901 NE 19TH AVE
N MIAMI BEACH, FL 33162 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: SANDY RODRIGUEZ****02/20/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT
Name HASTY, REBECCA
Address PO BOX 600124
City-State-Zip: NORTH MIAMI BEACH FL 33162**Title** VP
Name RIVERA, ERIC
Address PO BOX 600124
City-State-Zip: NORTH MIAMI BEACH FL 33162**Title** SECRETARY
Name DURHAM, SHAUNETTA
Address PO BOX 600124
City-State-Zip: NORTH MIAMI BEACH FL 33162**Title** TREASURER
Name RODRIGUEZ, SANDY
Address PO BOX 600124
City-State-Zip: NORTH MIAMI BEACH FL 33162**Title** BOARD MEMBER
Name GARCIA, EDWARD
Address PO BOX 600124
City-State-Zip: NORTH MIAMI BEACH FL 33162**Title** BOARD MEMBER
Name SANON, DUKENS
Address PO BOX 600124
City-State-Zip: NORTH MIAMI BEACH FL 33162**Title** BOARD MEMBER
Name FLORENCIO, RAFAEL
Address PO BOX 600124
City-State-Zip: NORTH MIAMI BEACH FL 33162**Title** BOARD MEMBER
Name AZEVEDO, MICHAEL
Address PO BOX 600124
City-State-Zip: NORTH MIAMI BEACH FL 33162**Continues on page 2**

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: SANDY RODRIGUEZ**TREASURER****02/20/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	BOARD MEMBER
Name	GOMES, RICK
Address	PO BOX 600124
City-State-Zip:	NORTH MIAMI BEACH FL 33162