

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

DOCUMENT# N02000002421

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC7039524624**

**Entity Name:** CITY OF SUNRISE FRATERNAL ORDER OF POLICE LODGE 80 ASSOCIATES, INC.

**Current Principal Place of Business:**

14150 NW 8TH ST.  
SUNRISE, FL 33325

**Current Mailing Address:**

POST OFFICE BOX 450581  
SUNRISE, FL 33345-0581

**FEI Number: 46-0473075**

**Certificate of Status Desired: Yes**

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

SANTISO, LES  
14150 NW 8TH ST  
SUNRISE, FL 33325 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 S  
Name QUARENGA, VALORIE  
Address 14150 NW 8TH ST  
City-State-Zip: SUNRISE FL 33325

Title T  
Name SALERNO, DEBBIE  
Address 14150 NW 8TH ST  
City-State-Zip: SUNRISE FL 33325

Title P  
Name SANTISO, LES  
Address 14150 NW 8TH ST  
City-State-Zip: SUNRISE FL 33325

Title VP  
Name ARENA, MIKE  
Address 14150 NW 8TH ST  
City-State-Zip: SUNRISE FL 33325

Title SA  
Name MORTON, ED  
Address 14150 NW 8TH ST  
City-State-Zip: SUNRISE FL 33325

*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: LES SANTISO**

**PRESIDENT**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date