

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21606

**FILED**  
**Jan 19, 2016**  
**Secretary of State**  
**CC3892406311**

**Entity Name:** CORAL GABLES FRATERNAL ORDER OF POLICE LODGE #7  
INC.

**Current Principal Place of Business:**

265 SEVILLA AVE  
SECOND FLOOR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

265 SEVILLA AVE  
SECOND FLOOR  
CORAL GABLES, FL 33134 US

**FEI Number: 59-2158232**

**Certificate of Status Desired: Yes**

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

BAUBLITZ, JOHN P  
265 SEVILLA AVE  
CORAL GABLES, FL 33134 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 PD  
Name BAUBLITZ, JOHN P  
Address 265 SEVILLA AVE  
City-State-Zip: CORAL GABLES FL 33134

Title SD  
Name ALEMAN, ANTONIO  
Address 265 SEVILLA AVE  
City-State-Zip: CORAL GABLES FL 33134

Title VD  
Name HOFF, RANDY  
Address 265 SEVILLA AVE  
City-State-Zip: CORAL GABLES FL 33134

Title TD  
Name BAEZ, JOSE  
Address 265 SEVILLA AVE  
SECOND FLOOR  
City-State-Zip: CORAL GABLES FL 33134

*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: JOHN BAUBLITZ**

**PRESIDENT**

**01/19/2016**

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

\_\_\_\_\_  
Date